No. C 154649		Due no later than May 31, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WEICHERT WORKFORCE MOBILITY INC. MICHELE A AZZOLLINI 1625 STATE ROUTE 10						
NO FILING FEE IF RECEIVED BY DUE DATE		MORRIS PLAINS NJ 07950		3. <u>I</u>				
4. Corporations: Enter Name	es and Busin	ess Addresses of Pi	resident, Secretary, and Directors. Treas	surer (opti	ional).			
Office Held	Name		Street or PO Address	Ci	ity	State	Country	Postal Code
SECRETARY DIRECTOR	RETARY STEPHEN S. JONES CCTOR JAMES M. WEICHERT		1625 STATE ROUTE 10 169 JOHNSON ROAD 1625 STATE ROUTE 10 1625 STATE ROUTE 10	M M	ORRIS PLAINS ORRIS PLAINS ORRIS PLAINS ORRIS PLAINS	(N (N (N (N	USA USA USA USA	07950 07950 07950 07950
5. Organized Under the Laws of: NO C 154649		6. Annual Report must be signed.* Signature: STEPHEN S. JONES Name (type or print): STEPHEN S. JONES				Date: 0	5/08/2017 SECRETARY	
Processed 05/08/2017		* Electronically provided signatures are accepted as original signatures.						