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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------------------------------------------------------------------|---------|-------------|
| No. <b>C 168129</b>                                                                                                                                    |                   | <b>Due no later than Jul 31, 2015</b>                                                                                                                                                               |         | 2. Registered Agent and Address <b>(NO PO BOX)</b>                           |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BROKERAGE CONCEPTS, INC.<br>NANCY M. KORSGREN<br>257 W GENESEE ST<br>BUFFALO NY 14202-2657<br>USA |         | CORPORATION SERVICE COMPANY<br>12550 W EXPLORER DR STE 100<br>BOISE ID 83713 |         |             |
|                                                                                                                                                        |                   |                                                                                                                                                                                                     |         | 3. <u>New</u> Registered Agent Signature:*                                   |         |             |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                   |                                                                                                                                                                                                     |         |                                                                              |         |             |
| Office Held                                                                                                                                            | Name              | Street or PO Address                                                                                                                                                                                | City    | State                                                                        | Country | Postal Code |
| PRESIDENT                                                                                                                                              | DAVID W. ANDERSON | 257 WEST GENESEE STREET                                                                                                                                                                             | BUFFALO | NY                                                                           | USA     | 14202-2657  |
| SECRETARY                                                                                                                                              | KENNETH J SODARO  | 257 WEST GENESEE STREET                                                                                                                                                                             | BUFFALO | NY                                                                           | USA     | 14202-2657  |
| 5. Organized Under the Laws of:<br><br><b>NY</b><br><b>C 168129</b>                                                                                    |                   | 6. Annual Report must be signed.*<br>Signature: Kenneth J. Sordao<br>Name (type or print): Kenneth J. Sordao<br>Date: 07/17/2015<br>Title: Secretary                                                |         |                                                                              |         |             |
| Processed 07/17/2015                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                                           |         |                                                                              |         |             |