

No. <b>C 193988</b>	<b>Due no later than Mar 31, 2015</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> PLANSOURCE BENEFITS ADMINISTRATION, INC. LEONIE SPIVEY 101 S. GARLAND AVENUE, SUITE 203 ORLANDO FL 32801 USA	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE 83705-3280					
		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	
DIRECTOR	DAYNE WILLIAMS	101 S. GARLAND AVENUE, SUITE 203	ORLANDO	FL	USA	32801	
PRESIDENT	SCOTT CARVER	101 S. GARLAND AVENUE, SUITE 203	ORLANDO	FL	USA	32801	
SECRETARY	SHANE STREUFERT	101 S. GARLAND AVE, SUITE 203	ORLANDO	FL	USA	32801	
5. Organized Under the Laws of:  <b>FL</b> <b>C 193988</b>	6. Annual Report must be signed.*		Signature: Shane Streufert				Date: 04/09/2015
		Name (type or print): Shane Streufert		Title: CFO/VP/Secretary/Treasurer			
Processed 04/09/2015		* Electronically provided signatures are accepted as original signatures.					