

No. C 186360	Due no later than Mar 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MANAGED INSURANCE SERVICES INC. WALTER T BRYSH 3200 NE 14TH ST POMPANO BEACH FL 33062		PARACORP INCORPORATED 1201 N LIBERTY STE 917 BOISE ID 83704 USA				
						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	DANIEL R ONEAL	3200 NE 14TH ST	POMPANO BEACH	FL	USA	33062	
5. Organized Under the Laws of: FL C 186360	6. Annual Report must be signed.* Signature: Daniel O'Neal Name (type or print): Daniel O'Neal						
Processed 03/08/2011	* Electronically provided signatures are accepted as original signatures.						