

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000006078

FILED
Oct 13, 2004
Secretary of State

Entity Name: NORTH AMERICAN ADMINISTRATORS, INC.

Current Principal Place of Business:

300 CORPORATE PARKWAY
AMHERST, NY 14226

New Principal Place of Business:

Current Mailing Address:

300 CORPORATE PARKWAY
AMHERST, NY 14226

New Mailing Address:

FEI Number: 16-1264154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZOELLER, RONALD
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: V (X) Delete
Name: MURPHY, GINA
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: S () Delete
Name: JOHNSON, BRUCE M
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

Title: T () Delete
Name: ADERMAN, KEVIN
Address: 300 CORPORATE PARKWAY
City-St-Zip: AMHERST, NY 14226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNI LOSEL

AS

10/13/2004

Electronic Signature of Signing Officer or Director

_____ Date