

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001635

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** ADMINISTRATIVE SYSTEMS, INC.

**Current Principal Place of Business:**

111 QUEEN ANNE AVE N SUITE 200  
SEATTLE, WA 98109

**New Principal Place of Business:**

**Current Mailing Address:**

111 QUEEN ANNE AVE N SUITE 200  
SEATTLE, WA 98109

**New Mailing Address:**

C/O NFP, 500 W. MADISON STREET  
SUITE 2400  
CHICAGO, IL 60661

**FEI Number:** 05-0555470

**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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DT  
Name: SCHNEIDER, BRETT  
Address: 340 MADISON AVENUE, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10173

Title: DP  
Name: GOLDMAN, MICHAEL N  
Address: 340 MADISON AVENUE, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10173

Title: S  
Name: HINKSON, MALIKA  
Address: 340 MADISON AVENUE, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10173

Title: VP  
Name: LIESER, LORI M  
Address: 500 W. MADISON STREET, SUITE 2400  
City-St-Zip: CHICAGO, IL 60661

I hereby 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 all other like empowered.

SIGNATURE: LORI M. LIESER

VP

04/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date