2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004972

FILED Apr 04, 2007 Secretary of State

Entity Name: SELECT BENEFIT SERVICES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

16476 CHESTERFIELD AIR PORT RD 2ND FL CHESTERFIELD, MO 63017

New Mailing Address: Current Mailing Address:

16476 CHESTERFIELD AIR PORT RD 2ND FL CHESTERFIELD, MO 63017

FEI Number: 43-1745696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WERNER, RONALD 4875 COCONUT CREEK PKWY COCONUT CREEK, FL 33063 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BRECKENRIDGE, DON JR GORDON, DANNY Name:

Name: 200 S. HANLEY STE 710 Address: 7101 EXECUTIVE CENTER DRIVE, #100 Address:

City-St-Zip: CLAYTON, MO 63105 City-St-Zip: BRENTWOOD, TN 37027

Title: **VCVP** () Delete Title: D/VP (X) Change () Addition

Name: TRUNNELL, TIM Name: DARLING, KIM

Address: 707 VIVIAN Address: 20532 EL TORO RD. #303 City-St-Zip: COLLINSVILLE, IL 62234 City-St-Zip: MISSION VIEJO, CA 92692

Title: DST () Delete Title: D/ST (X) Change () Addition

PARKER, ROBERT BOEKER, KAREN Name: Name: 13 BORDEAUX PLACE 516 RAMBLEWOOD DRIVE Address: Address: City-St-Zip: LAKE S.T LOUIS, MO 63367 City-St-Zip: BRYN MAUR, PA 19010

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANNY GORDON Ρ 04/04/2007