2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Mar 27, 2007 8:00 am
Secretary of State
03-27-2007 90005 035 ***150.00

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1. Entity Name
BOON-CHAPMAN BENEFIT ADMINISTRATORS, INC.

40042066

Principal Place of Business	Mailing Address
12301 RESEARCH BLVD. BLDG. 4,STE 400 AUSTIN, TX 78759	PO BOX 9201 AUSTIN, TX 78766

03142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
74-2305238
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	CHAPMAN, KEVIN S
STREET ADDRESS	12301 RESEARCH BLVD., BLDG. 4, STE. 400
CITY-ST-ZIP	AUSTIN, TX 78752
TITLE	DV
NAME	CHAPMAN, BETTY S
STREET ADDRESS	12301 RESEARCH BLVD., BLDG. 4, STE 400
CITY-ST-ZIP	AUSTIN, TX 78759
TITLE	V/D
NAME	CHAPMAN, T.J.
STREET ADDRESS	12301 RESEARCH BLVD, BLDG. 4, STE 400
CITY-ST-ZIP	AUSTIN, TX 78759
TITLE	D
NAME	LINDAUER, ROBERT A
STREET ADDRESS	12301 RESEARCH BLVD; BLDG 4, STE 400
CITY-ST-ZIP	AUSTIN, TX 78759
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Robert A. Lindauer

SIGNATURE: Robert A. Lindauer 3/14/07 512-253-7130
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #