

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 07, 2011
Secretary of State

Entity Name: BOON-CHAPMAN BENEFIT ADMINISTRATORS, INC.

Current Principal Place of Business:

12301 RESEARCH BLVD.
BLDG. 4, STE 400
AUSTIN, TX 78759

New Principal Place of Business:

Current Mailing Address:

PO BOX 9201
AUSTIN, TX 78766

New Mailing Address:

FEI Number: 74-2305238

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
#250
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

OFFICERS AND DIRECTORS:

Title: PSD
Name: CHAPMAN, KEVIN S
Address: 12301 RESEARCH BLVD., BLDG. 4, STE. 400
City-St-Zip: AUSTIN, TX 78759

Title: V
Name: CHAPMAN, BETTY S
Address: 12301 RESEARCH BLVD., BLDG. 4, STE 400
City-St-Zip: AUSTIN, TX 78759

Title: V/D
Name: CHAPMAN, T.J.
Address: 12301 RESEARCH BLVD, BLDG. 4, STE 400
City-St-Zip: AUSTIN, TX 78759

Title: T/D
Name: LINDAUER, ROBERT A
Address: 12301 RESEARCH BLVD; BLDG 4, STE 400
City-St-Zip: AUSTIN, TX 78759

Title: V
Name: LEFTWICH, NYLE J
Address: 12301 RESEARCH BLVD., BLDG 4, STE 400
City-St-Zip: AUSTIN, TX 78759

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: ROBERT A. LINDAUER

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03/07/2011

Electronic Signature of Signing Officer or Director

Date