

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006156

FILED
Feb 25, 2009
Secretary of State

Entity Name: USBENEFIT PLAN RX AMERICA INC.

Current Principal Place of Business:

16476 CHESTERFIELD AIRPORT RD
CHESTERFIELD, MO 63017

New Principal Place of Business:

16476 WILD HORSE CREEK ROAD
CHESTERFIELD, MO 63017

Current Mailing Address:

16476 CHESTERFIELD AIRPORT RD
CHESTERFIELD, MO 63017

New Mailing Address:

16476 WILD HORSE CREEK ROAD
CHESTERFIELD, MO 63017

FEI Number: 43-1745698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: D () Delete
Name: WRIGHT JR., TOM
Address: 13537 BARRETT PARKWAY DR, #325
City-St-Zip: BALLWIN, MO 63021

Title: D () Delete
Name: MINERT, TED
Address: 196 CHERRY HILLS MEADOW DRIVE
City-St-Zip: WILDWOOD, MO 63040

Title: D () Delete
Name: HARSHBARGER, ALLAN
Address: 3715 BRADFORD TERR
City-St-Zip: MANHATTAN, KS 66503

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:

I hereby certify that the information supplied with this filing does not qualify 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: TOM WRIGHT, JR.

PRES

02/25/2009

Electronic Signature of Signing Officer or Director

Date