

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 11, 2011
Secretary of State

Entity Name: ALLIANCE BENEFIT GROUP FINANCIAL SERVICES, CORP.

Current Principal Place of Business:

201 E. CLARK STREET
ALBERT LEA, MN 56007

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1206
ALBERT LEA, MN 56007

New Mailing Address:

FEI Number: 41-1471080

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

OFFICERS AND DIRECTORS:

Title: D
Name: ARENDS, ALAN B
Address: 1645 MASSEE
City-St-Zip: ALBERT LEA, MN 56007

Title: P
Name: ARENDS, BRADLEY K
Address: 217 SOUTH LANE
City-St-Zip: ALBERT LEA, MN 56007

Title: V
Name: ARENDS, GRANT S
Address: 13017 PEMBROKE
City-St-Zip: LEAWOOD, KS 66209

Title: S
Name: ARENDS, TEMPEST
Address: 217 SOUTH LANE
City-St-Zip: ALBERT LEA, MN 56007

Title: T
Name: ARENDS, PATRICIA L
Address: 1645 MASSEE
City-St-Zip: ALBERT LEA, MN 56007

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: BRADLEY K. ARENDS

PRES

03/11/2011

Electronic Signature of Signing Officer or Director

Date