

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003444

Entity Name: MBI BENEFITS, INC.

FILED  
Apr 02, 2012  
Secretary of State

## Current Principal Place of Business:

1601 TRAPELO ROAD  
WALTHAM, MA 02451

## New Principal Place of Business:

1601 TRAPELO ROAD  
WALTHAM, MA 02451 US

## Current Mailing Address:

1601 TRAPELO ROAD  
WALTHAM, MA 02451

## New Mailing Address:

1601 TRAPELO ROAD  
WALTHAM, MA 02451 US

FEI Number: 38-3261866

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: PCEO  
Name: NORCROSS, GARY A PCEO  
Address: 601 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: SVPT  
Name: LARSEN, KIRK T SVPT  
Address: 601 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: SECD  
Name: GRAVELLE, MICHAEL L SECD  
Address: 601 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: DIR  
Name: NORCROSS, GARY A DIR  
Address: 601 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204 US

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: KELLY LETTMANN

POA

04/02/2012

Electronic Signature of Signing Officer or Director

Date