2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jul 05, 2005 8:00 am **Secretary of State DOCUMENT # F93000000163** 07-05-2005 90117 033 ***550.00 REMINGTON EMPLOYERS CORPORATION Principal Place of Business Mailing Address 14180 DALLAS PARKWAY 14180 DALLAS PARKWAY UUUEUUU 9TH FLOOR 9TH FLOOR DALLAS, TX 75240 DALLAS, TX 75240 2. Principal Place of Business 3. Mailing Address 14185 DALLAS PKW 14185 DA/145 TKW Suite, Apt. #, etc 06152005 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For 75-2429838 Not Applicable Ζiρ \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CDTS - Change ☐ Delete TITLE TITLE ■ Addition NAME BENNETT, ARCHIE JR. NAME 14185 Dallas Parkway, Suite 1150 14180 DALLAS PARKWAY, 9TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS, TX Dallas, TX 75254 Oeleta TITLE Change ☐ Addition TITLE BENNETT, MONTY NAME NAME 14185 Dalles Parkway, Swite 1150 STREET ADDRESS 14180 DALLAS PARKWAY, 9TH FLOOR STREET ADDRESS CITY-ST-7P Dallas TR 75254 CITY-ST-ZIP DALLAS, TX ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY+ST-7/P CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-73P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Monty BONNett 6-30 05

FILED