

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91028 001 ***150.00

DOCUMENT # F93000002902
 1. Entity Name
 SERVICE ADMINISTRATORS, INC. (USA)



Principal Place of Business
 2700 SANDERS RD
 ATTN: TAX DEPT
 PROSPECT HEIGHTS, IL 60070

Mailing Address
 2700 SANDERS RD
 ATTN: TAX DEPT
 PROSPECT HEIGHTS, IL 60070



2. Principal Place of Business
 Suite, Apt. #, etc.
 2700 SANDERS ROAD
 City
 PROSPECT HEIGHTS IL 60070

3. Mailing Address
 Suite, Apt. #, etc.
 2700 SANDERS ROAD
 City
 PROSPECT HEIGHTS IL 60070

Zip Country Zip Country

04212004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD O'BRIEN, DANIEL R 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DFCT TITUS, TIMOTHY J 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANGS, L N 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIS, J A 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ANDERSON, JT 25700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCA LUNEMANN, GERARD 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD Patrick A. Cozza 200 Somerset Corporate Blvd. Bridgewater, NJ 08807	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS Alan M. Kiemenzky	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Jason T. Anderson JASON T. Anderson / ASST. SEC. 4/23/04 847-564-6668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #