2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000709

Current Principal Place of Business:

Entity Name: WELLPOINT SYSTEMS, INC.

FILED Jul 22, 2008 Secretary of State

220 SOUTH ORANGE AVNEUE 550 NORTH REO STREET LIVINGSTON, NJ 07039 SUITE 203 TAMPA, FL 33609 **Current Mailing Address:** New Mailing Address: 220 SOUTH ORANGE AVNEUE 550 NORTH REO STREET LIVINGSTON, NJ 07039 SUITE 203 TAMPA, FL 33609 FEI Number: 22-2424018 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **GREG ROBERTSON** GREGORY M ROBERTSON 203, 550 NORTH REO STREET 550 NORTH REO STREET TAMPA, FL 33609 SUITE 203 TAMPA, FL 33609 US 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: GREGORY M ROBERTSON 07/22/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().

Title:

Address:

City-St-Zip:

OFFICERS AND DIRECTORS:

() Delete

2000 500 4TH AVENUE SW

CALGARY, AB T2P 2V6 CA

Title:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

New Principal Place of Business:

STANFORD, FRANK Name: Name: 2000 500 4TH AVENUE SW Address: Address: City-St-Zip: CALGARY, AB T2P 2V6 City-St-Zip: VΡ Title: Title: () Delete (X) Change () Addition BEASLEY, PETER S Name: BEASLEY, PETER Name: 220 SOUTH ORANGE AVNEUE 550 NORTH REO STREET / SUITE 203 Address: Address: LIVINGSTON, NJ 07039 TAMPA, FL 33609 City-St-Zip: City-St-Zip: Title: (X) Change () Addition () Delete Title: ROBERTSON, GREG ROBERTSON, GREGORY M Name: Name: 220 SOUTH ORANGE AVNEUE 550 NORTH REO STREET / SUITE 203 Address: Address: City-St-Zip: LIVINGSTON, NJ 07039 City-St-Zip: TAMPA, FL 33609 Title: CFO (X) Delete Title: () Change () Addition PETRIE, BRUCE Name:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY M ROBERTSON VP 07/22/2008