2008 LIMITED LIABILITY COMPANY

SIGNATURE

May 27, 2008 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # M07000003570 05-27-2008 90371 041 ***538.75 Entity Name TRISERV ALLIANCE, LLC Principal Place of Business Mailing Address 8381 DIX ELLIS TRAIL 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05122008 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 26-0270957 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 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) FILE NOW!!! FEE IS \$538.75 Make check payable to Due by September 12, 2008 Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. MGRM TITLE Delete ☐ Change TIT1 F ☐ Addition BLUE CROSS AND BLUE SHIELD OF FLA., INC. NAME NAME STREET ADDRESS 4800 DEERWOOD CAMPUS PARKWAY, #100, 7TH FL STREET ADDRESS JACKSONVILLE, FL 32256 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete MESIDENT + CEO **Addition** TITLE ☐ Change NAME NAME CHARLES S. ABELL 8381 DIX ELLIS TRAIL, 2 MD FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FL 32256 TITLE Defete TITLE ☐ Change **⊠** Addition NAME NAME (SEE ATTACHED STREET ADDRESS STREET ADDRESS CONTINUATION SHEET CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 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-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the receiver or true empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

ATTACHMENT

2008 Limited Liability Company Annual Report Document #M07000003570 TriServ Alliance, LLC

CONTINUATION SHEET

MGR MARK WHITE 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR STEVE COULTER 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR MIKE HAYES 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR JACK LEBER 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR ROBERT LUFRANO 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR PAT HEMINGWAY-HALL 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256

MGR TERRY KELLOGG 8381 DIX ELLIS TRAIL JACKSONVILLE, FL 32256