

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005476

FILED
Apr 10, 2012
Secretary of State

Entity Name: POLICYWORKS INC

Current Principal Place of Business:

4220 NATURAL BRIDGE ROAD
TALLAHASSEE, FL 32305 US

New Principal Place of Business:

Current Mailing Address:

4220 NATURAL BRIDGE ROAD
TALLAHASSEE, FL 32305 US

New Mailing Address:

FEI Number: 80-0637699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUTZ, BARBARA A
4220 NATURAL BRIDGE ROAD
TALLAHASSEE, FL 32305 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: P
Name: BUTZ, BARBARA A
Address: 4220 NATURAL BRIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32305 US

Title: VP
Name: ARGOFF, JEANNE N
Address: 2529 KIRKLYN STREET
City-St-Zip: FALLS CHURCH, VA 22043 US

Title: ST
Name: JENNINGS, ELIZABETH
Address: 1667 K STREET NW
City-St-Zip: WASHINGTON, DC 20006 US

Title: DIR
Name: SHIELDS, DEREK
Address: 6858 OLD DOMINION ROAD SUITE 250
City-St-Zip: MCLEAN, VA 22101

Title: DIR
Name: GLUNT, ERIC
Address: SDSU INTERWORK 6850 CAMINO DEL RIO
City-St-Zip: SAN DIEGO, CA 92108

Title: DIR
Name: GOOSMAN, GARY
Address: 1501 M STREET NW 7TH FL
City-St-Zip: WASHINGTON, DC 20005

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

SIGNATURE: BARBARA A. BUTZ

PRES

04/10/2012

Electronic Signature of Signing Officer or Director

Date