

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P14528

1. Entity Name

BENEFIT DESIGNS, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90065 005 ***150.00

Principal Place of Business

Mailing Address

7265 KENWOOD ROAD
SUITE 315
CINCINNATI OH 45236

~~7265 KENWOOD ROAD~~
~~SUITE 015~~
~~CINCINNATI OH 45236-4411~~

2. Principal Place of Business

3. Mailing Address

7100 E. Bellerue Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 300

City & State

City & State

Greenwood Village CO

Zip

Country

Zip

Country

80111

USA

4. FEI Number

31-0931901

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P ☒ Delete

NAME RINGLER, DAVID V
STREET ADDRESS 7265 KENWOOD RD., STE 315
CITY-ST-ZIP CINCINNATI OH 45236

TITLE VSTD ☒ Delete

NAME COLEMAN, MARK C
STREET ADDRESS 7265 KENWOOD RD., STE. 315
CITY-ST-ZIP CINCINNATI OH 45236

TITLE D ☒ Delete

NAME EHLEN, DAVID
STREET ADDRESS 7265 KENWOOD RD., STE 315
CITY-ST-ZIP CINCINNATI OH 45236

TITLE D ☒ Delete

NAME WATTS, ERIC
STREET ADDRESS 7265 KENWOOD RD., STE 315
CITY-ST-ZIP CINCINNATI OH 45236

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition

NAME David V. Ringler
STREET ADDRESS 7100 E. Bellerue Ave. Suite 300
CITY-ST-ZIP Greenwood Village, CO 80111

TITLE Vice Presidents ☒ Change ☐ Addition

NAME Laurie Graves and Joseph Costello
STREET ADDRESS 7100 E. Bellerue Ave. Suite 300
CITY-ST-ZIP Greenwood Village, CO 80111

TITLE Secretary and Treasurers ☒ Change ☐ Addition

NAME Mark Coleman
STREET ADDRESS 10 S. Riverside Plaza # 2200
CITY-ST-ZIP Chicago, IL 60606

TITLE Director ☐ Change ☒ Addition

NAME David Hoffmann
STREET ADDRESS 10 S. Riverside Plaza # 2200
CITY-ST-ZIP Chicago, IL 60606

TITLE Director ☐ Change ☒ Addition

NAME Mike Goldstein
STREET ADDRESS 10 S. Riverside Plaza # 2200
CITY-ST-ZIP Chicago, IL 60606

TITLE Director ☐ Change ☒ Addition

NAME Early Price Pritchett III
STREET ADDRESS 9605 Winding Ridge Dr.
CITY-ST-ZIP Dallas, TX 75238

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

05/01/00 (303) 337-0400

CR2E034 (9/99)