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2005 FOR PROFIT CORPORATION ANNUAL REPORT

01-24-2005 90050 029 ***150.00 **DOCUMENT # P20776** DESIGN BENEFIT PLANS, INC. Principal Place of Business Mailing Address 50005622 11825 N PENNSYLVANIA ST 11825 N PENNSYLVANIA ST CARMEL, IN 46032 US CARMEL, IN 46032 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032005 Cha-P CB2F034 (10/03) City & State City & State 4. FFI Number Applied For 36-3496297 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FI 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. X Delete TITLE SR. VP TITLE NAME SKIEWCONNERSHAWCE NAME WILLIAM T. DEVANNEY, JR. STREET ADDRESS 11825 N. PENNSYLVANIA ST STREET ADDRESS 11825 N. PENNSYLVANIA ST. CITY-ST-ZIP **CARMEL, IN 46032** CITY-ST-ZIP CARMEL, IN 46032 ח Delete TITLE TITLE X Change Addition BOKKKSXEXASEME NAME NAME KARL W. KINDIG STREET ADDRESS 11825 N. PENNSYLVANIA ST STREET ADDRESS 11825 N. PENNSYLVANIA ST. CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-ZIP CARMEL, IN 46032 TITLE X Delete X Change TITLE Addition REPORTS NAME NAME DANIEL J. MURPHY 11825 N. PENNSYLVANIA ST STREET ADDRESS STREET ADDRESS 11825 N. PENNSYI VANIA ST. CITY-ST-ZIP CITY-ST-ZIP CARMEL, IN 46032 CARMEL, IN 46032 X Delete Change TITLE TITLE ☐ Addition BEVANNEVURCANDERADO NAME EUGENE M. BULLIS NAME STREET ADDRESS 11825 N. PENNSYLVANIA ST STREET ADDRESS 11825 N. PENNSYLVANIA ST. CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-7IP CARMEL, IN 46032 TITLE Delete TITLE Change ■ Addition MUSCEPHOCOGORANTICACK NAME NAME STREET ADDRESS 11825 N. PENNSYLVANIA ST STREET ADDRESS CITY-ST-ZIP CARMEL, IN 46032 CITY-ST-ZIP TITLE X Delete TITLE Change Addition **CLIMEDOMSAIRE** NAME NAME STREET ADDRESS 11825 N. PENNSYLVANIA ST STREET ADDRESS CARMEL, IN 46032 CITY-ST-ZIP CITY-ST-ZIP

FILED Jan 24, 2005 8:00 am

Secretary of State

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:	Kall Kindy	KARL W. KINDIG, SECRETARY	-20	-200317-817-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date	Daytime Phone if