

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004991

Entity Name: BOON-CHAPMAN BENEFIT ADMINISTRATORS, INC.**Current Principal Place of Business:**9401 AMBERGLEN BLVD,
BLDG I, STE 100
AUSTIN, TX 78729**Current Mailing Address:**PO BOX 9201
AUSTIN, TX 78766**FEI Number: 74-2305238****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PSD
Name	CHAPMAN, KEVIN S
Address	9401 AMBERGLEN BLVD. BLDG I STE100
City-State-Zip:	AUSTIN TX 78729

Title	V
Name	CHAPMAN, BETTY S
Address	9401 AMBERGLEN BLVD. BLDG I STE100
City-State-Zip:	AUSTIN TX 78729

Title	V/D
Name	CHAPMAN, T.J.
Address	9401 AMBERGLEN BLVD. BLDG I STE100
City-State-Zip:	AUSTIN TX 78729

Title	T/D
Name	LINDAUER, ROBERT A
Address	9401 AMBERGLEN BLVD. BLDG I STE100
City-State-Zip:	AUSTIN TX 78729

Title	V
Name	LEFTWICH, NYLE J
Address	9401 AMBERGLEN BLVD. BLDG I STE100
City-State-Zip:	AUSTIN TX 78729

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

SIGNATURE: ROBERT A. LINDAUER**TREASURER****03/07/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date