

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002456

Entity Name: BLISS MCKNIGHT COMMON PAYMASTER, INC.**Current Principal Place of Business:**ATTENTION RACHELLE LUDWIG
2801 EAST EMPIRE STREET
BLOOMINGTON, IL 61704**Current Mailing Address:**2801 EAST EMPIRE
BLOOMINGTON, IL 61704 US**FEI Number:** 37-0895869**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DSC
Name BLISS, JAMES
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title DP
Name MCKNIGHT, JOHN
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title ASST. SECRETARY, VP
Name MATHEWSON, ROBERT
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title SECRETARY VP
Name LUDWIG, RACHELLE
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title AVP, TREASURER
Name GLOVER, KRISTINE
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title VP
Name LAGE, SCOTT
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title VP
Name SCHMIDT, DAN
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

Title VP
Name WHITE, ROBERT
Address 2801 EAST EMPIRE
City-State-Zip: BLOOMINGTON IL 61704

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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: RACHELLE J. LUDWIGSECRETARY, FP BLISS
MCKNIGHT, INC.

04/14/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP
Name	ANDREWS, KRISTIN
Address	2801 EAST EMPIRE
City-State-Zip:	BLOOMINGTON IL 61704