

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003830

Entity Name: BENEFIT PARTNERS-ALLIANT, INC.

Current Principal Place of Business:

6430 ROCKLEDGE DRIVE, SUITE 504
BETHESDA, MD 20817

Current Mailing Address:

6430 ROCKLEDGE DRIVE, SUITE 504
BETHESDA, MD 20817 US

FEI Number: 20-1788594

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 DIR, CEO, CHAIRMAN
Name CORBETT, THOMAS W
Address 1301 DOVE STREET, SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title DIR, COO
Name HURST, RALPH S
Address 1301 DOVE STREET, SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title DIR, PRESIDENT
Name ZIMMER, P. GREGORY JR
Address 1301 DOVE STREET, SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title TREA
Name FILLEY, TED C
Address 1301 DOVE STREET, SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

Title SEC
Name ZAK, KENNETH A
Address 1301 DOVE STREET, SUITE 200
City-State-Zip: NEWPORT BEACH CA 92660

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: KENNETH A. ZAK

SECRETARY

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date