

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003046

Entity Name: STONEBRIDGE BENEFIT SERVICES, INC.**Current Principal Place of Business:**2700 W. PLANO PARKWAY
PLANO, TX 75075-8200**Current Mailing Address:**2700 W. PLANO PARKWAY
PLANO, TX 75075-8200**FEI Number: 94-2896108****Certificate of Status Desired:** No**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	DP
Name	ZAJKOWSKI, ERIN A
Address	300 EAGLEVIEW BLVD.
City-State-Zip:	EXTON PA 19341

Title	T
Name	MCCONNELL, MARTHA A
Address	100 LIGHT STREET, FLOOR B1
City-State-Zip:	BALTIMORE MD 21202

Title	DV
Name	THORNTON, MARK L
Address	2700 W. PLANO PARKWAY
City-State-Zip:	PLANO TX 75075

Title	C
Name	WILSON, MICHAEL L
Address	100 LIGHT STREET, FLOOR B1
City-State-Zip:	BALTIMORE MD 21202

Title	DS
Name	NEUBAUER, WILLIAM P
Address	2700 WEST PLANO PARKWAY
City-State-Zip:	PLANO TX 75075

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: WILLIAM P. NEUBAUER**DS****03/13/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date