



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 162535		2. Name of Corporation Total Benefit Communications, Inc.			
3. Street Address Principal Business Office 4135 North Front Street			City Harrisburg	State PA	Zip 17110
4. Business Phone No. 717-657-0789		5. State of Incorporation GA			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert Guillocheau			Vice President Name Michael R. Folmer		
Street Address 200 Dryden Road			Street Address 4135 North Front Street		
City Dresher	State PA	Zip 19025	City Harrisburg	State PA	Zip 17110
Secretary Name Ellen R. Dunkin			Treasurer Name Michael Finn		
Street Address 199 Water Street, 28th Floor			Street Address 200 Dryden Road		
City New York	State NY	Zip 10038	City Dresher	State PA	Zip 19025
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Andrew P. Forstenzer			Director Name Scot H. Parnell		
Street Address 7557 Rambler Road			Street Address 105 Eisenhower Parkway		
City Dallas	State TX	Zip 75231	City Roseland	State NJ	Zip 07068
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 1000	Class/Series Common	Par Value \$0.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Michael R. Folmer Date: 11-9-11

Michael R. Folmer

Print or Type Name

Vice President/Tax Director

Title

File Date	FILED
Check No.	DEC 06 2011
By:	By [Signature]
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