

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004746

FILED
Apr 09, 2012
Secretary of State

Entity Name: THE INDEPENDENT TRAVELER, INC.

Current Principal Place of Business:

2 TREE FARM ROAD
SUITE B-300
PENNINGTON, NJ 08534

New Principal Place of Business:

Current Mailing Address:

ATTN: LEGAL DEPT
333 108TH AVENUE NE
BELLEVUE, WA 98004

New Mailing Address:

ATTN: LEGAL DEPT
141 NEEDHAM STREET
NEWTON, MA 02464

FEI Number: 22-3413070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: TUCKER, KATHLEEN
Address: 7 TREE FARM ROAD
City-St-Zip: PENNINGTON, NJ 08534

Title: CEO
Name: KAUFER, STEPHEN
Address: 141 NEEDHAM STREET
City-St-Zip: NEWTON, MA 02464

Title: ASEC
Name: FILIPPI, SUZANNE
Address: 141 NEEDHAM STREET
City-St-Zip: NEWTON, MA 02464

Title: SECY
Name: KALVERT, SETH
Address: 141 NEEDHAM STREET
City-St-Zip: NEWTON, MA 02464

Title: TREA
Name: BRADLEY, JULIE
Address: 141 NEEDHAM STREET
City-St-Zip: NEWTON, MA 02464

Title: VP
Name: YOUNG, TYLER
Address: 141 NEEDHAM STREET
City-St-Zip: NEWTON, MA 02464

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: SUZANNE FILIPPI

ASEC

04/09/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date