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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/17/95
1:57 PM

DO NOT WRITE IN THIS SPACE.

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

National Student Services, Inc.

P20251

Principal Place of Business

Mailing Address

National Student Services, Inc.
208 Old Lancaster Road
DeVos PA 19333

2. Principal Place of Business

2a. Mailing Address

21 Same

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

3. Date Incorporated or Qualified

04-28-82

3a. Date of Last Report

02-14-94

4. FEI Number

23-2210329

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

XL Corporate Services, Inc.

1017 Thomasville Road

Suite B

Tallahassee, FL 32302

81 Name N/A

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

N/A

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President P

NAME Juanita E. Nicolucci

STREET ADDRESS 31 Glendale Road

CITY-ST-ZIP Havertown PA 19083

TITLE Secretary / Treasurer T/S

NAME William C. Coffin, Jr.

STREET ADDRESS 35 Grove Road

CITY-ST-ZIP Basking Ridge, NJ 07920

TITLE Vice President V

NAME Linda P. Brodey

STREET ADDRESS 270 West Boot Road

CITY-ST-ZIP West Chester, PA 19380

TITLE Vice President V

NAME R. Charmaine Smith

STREET ADDRESS RR3 Box 234

CITY-ST-ZIP ELKERS, PA 19520

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

please see the attached

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE Assistant Vice President ☐ Change ☒ Addition

1.2 NAME Annamary Callahan

1.3 STREET ADDRESS 698 Spring dell Road

1.4 CITY-ST-ZIP King of Prussia PA 19406

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Juanita E. Nicolucci

Juanita E. Nicolucci, April 26, 1995

(610) 688-2277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1-800-345-1335

NSS, Inc.

208 Old Lancaster Road • P.O. Box 1500 • Devon, PA 19333-0906
Telephone: (610) 688-2277 FAX: (610) 688-2204

• A Claims Administrative Company •

OFFICERS	POSITIONS	SOCIAL SECURITY NUMBERS	
<i>Juanita E. Nicolucci</i>	<i>President</i>	<i>172-34-8438</i>	<i>P</i>
<i>Linda P. Boodey</i>	<i>Vice President</i>	<i>166-42-1143</i>	<i>✓</i>
<i>R. Charmaine Smith</i>	<i>Vice President</i>	<i>194-38-8192</i>	<i>✓</i>
<i>Annamary Callahan</i>	<i>Assistant Vice President</i>	<i>211-50-1113</i>	<i>Asst. ✓</i>
<i>William C. Coffin, Jr.</i>	<i>Secretary/Treasurer</i>	<i>156-36-9874</i>	<i>T/S</i>

DIRECTORS

<i>Thomas J. Conway</i>	<i>Chairman of the Board</i>	<i>051-26-5816</i>	<i>C</i>
<i>Kevin T. Conway</i>		<i>061-56-3347</i>	<i>D</i>
<i>Juanita E. Nicolucci</i>		<i>172-34-8438</i>	<i>D</i>
<i>Lawrence I. Raff</i>		<i>091-34-6056</i>	<i>D</i>

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■ *A Claims Administrative Company* ■

OFFICERS OF NATIONAL STUDENT SERVICES, INC.

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>SOCIAL SECURITY NUMBER</u>
Juanita E. Nicolucci 31 Glendale Road Havertown, PA 19083	President	172-34-8438
Linda P. Boodey 270 West Boot Road West Chester, PA 19380	Vice President	166-42-1143
R. Charmaine Smith RR3, Box 234 Elverson, PA 19520	Vice President	194-38-8192
Annamary Callahan 698 Springdell Road King of Prussia, PA 19406	Assistant Vice President	211-50-1113
William C. Coffin, Jr. 35 Grove Road Basking Ridge, NJ 07920	Secretary/Treasurer	156-36-9874

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DIRECTORS OF NATIONAL STUDENT SERVICES, INC.

<u>NAME AND ADDRESS</u>	<u>SOCIAL SECURITY NUMBER</u>
Thomas J. Conway 9 Bender Way Pound Ridge, NY 10576	Chairman of the Board 051-26-5816
Kevin T. Conway 60 Marycrest Road West Nyack, NY 10994	061-56-3347
Juanita E. Nicolucci 31 Glendale Road Havertown, PA 19083	172-34-8438
Lawrence E. Raff 24 Bennington Drive East Windsor, NJ 08520	091-34-6056

National Student Services, Inc.