

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38993

FILED
Jan 30, 2007
Secretary of State

Entity Name: IBM BUSINESS TRANSFORMATION OUTSOURCING INSURANCE SERVICES CORPORATION

Current Principal Place of Business:

2000 WADE HAMPTON BLVD.
GREENVILLE, SC 29615

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 19101
GREENVILLE, SC 29602 US

New Mailing Address:

FEI Number: 57-0935614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHWEPPE, HENRY III
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: S () Delete
Name: BUDD, STEVEN W
Address: 294 ROUTE 100
City-St-Zip: NEW YORK, NY 10589

Title: T () Delete
Name: RATCLIFF, PHILIP C
Address: 2000 WADE HAMPTON BLVD
City-St-Zip: GREENVILLE, SC 29615

Title: D () Delete
Name: GENOVESE, RICHARD A
Address: 1507 LBJ FREEWAY
City-St-Zip: DALLAS, TX 75234

Title: D (X) Delete
Name: HEGMANN, KATHERINE C
Address: 294 ROUTE 100
City-St-Zip: NEW YORK, NY 10589

Title: D () Delete
Name: SCHWEPPE, HENRY N III
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RATCLIFF, PHILIP C
Address: 2000 WADE HAMPTON BLVD
City-St-Zip: GREENVILLE, SC 29615

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PHILIP RATCLIFF

VP

01/30/2007

Electronic Signature of Signing Officer or Director

_____ Date