No. C 194012		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. FASI INSURANCE SERVICES, INC. DANA THOMSEN 400 1ST ST S 300 ST CLOUD MN 56301		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
RECEIVED BY DUE	DATE	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer	(ontional)			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER VICE PRESIDENT SECRETARY	PRESIDENT SHANNON CONDRA		400 FIRST STREET SOUTH 655 WEST BROADWAY 200 N SEPULVEDA BLVD STE 1200	ST CLOUD SAN DIEGO EL SEGUNDO	MN CA CA	USA USA USA	56301 92101 90245
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
CA C 194012		Signature: GREG OLSON Name (type or print): GREG OLSON		Date: 03/13/2018 Title: SECRETARY			
Processed 03/13/2018 * Electronically provided signatures are accepted as original signatures.							