

| No. C 124091 | | Due no later than May 31, 2017 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--------------------|---|----------|--|---------|--|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. AMERISAFE RISK SERVICES, INC. ANGELA PEARSON 2301 HWY 190 W DERIDDER LA 70634 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 | | | |
| | | | | | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| DIRECTOR | VINCENT J GAGLIANO | 2301 HWY 190 W | DERIDDER | LA | USA | 70634 | |
| PRESIDENT | G JANELLE FROST | 2301 HWY 190 W | DERIDDER | LA | USA | 70634 | |
| SECRETARY | KATHRYN H SHIRLEY | 2301 HWY 190 W | DERIDDER | LA | USA | 70634 | |
| TREASURER | NEAL A FULLER | 2301 HWY 190 W | DERIDDER | LA | USA | 70634 | |
| 5. Organized Under the Laws of: LA C 124091 | | 6. Annual Report must be signed.* Signature: ANGELA PEARSON Name (type or print): ANGELA PEARSON | | | | | |
| | | Date: 04/28/2017 Title: VP CONTROLLER | | | | | |
| Processed 04/28/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | |