

No. C 104217

Due no later than December 31, 2007
Annual Report Form

1. Mailing Address - Correct in this box, if applicable

STUDENT ASSURANCE SERVICES, INC.
PO BOX 196
STILLWATER, MN 55082

2. Registered Agent and Office NO PO BOX

CT CORPORATION SYSTEM
1111 W JEFFERSON STE 530
BOISE, ID 83702
USA

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	MARK L. Desch	9985 ARCOLA Ct.	Stillwater	MN	55082
Secretary	GLORIA M. Desch	9985 ARCOLA Ct.	Stillwater	MN	55082
Directors:	MARK L. Desch	Same as above			
	GLORIA M. Desch	" " "			
	DANIEL M. Desch	689 Hidden Valley Ct.	Stillwater	MN	55082

5. Organized Under the Laws of:
MINNESOTA
C 104217

6.

Signature

Mark L. Desch

Date

10/15/07

Name

(Typed or
Printed)

MARK L. Desch

Title

President

200712001561

Do Not Tape or Staple