No. <b>C 158012</b>		Due no later than Dec 31, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  AMERICAN SPECIALTY INSURANCE & RISK SERVICES, INC. 142 NORTH MAIN STREET ROANOKE IN 46783 USA		2. Registered Agent and Address (NO PO BOX)  C T CORPORATION SYSTEM  921 S ORCHARD ST STE G  BOISE 83705  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE							
				4. Corporations: Enter Na	ames and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasurer
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	ANTHONY L. WITTWER		142 NORTH MAIN STREET	ROANOKE	IN	USA	46783
TREASURER	ASURER RACHEL PORTO		142 NORTH MAIN STREET	ROANOKE	IN	USA	46783
SECRETARY			142 NORTH MAIN STREET	ROANOKE	IN	USA	46783
DIRECTOR	ANTHONY L.	. WITTWER	142 NORTH MAIN STREET	ROANOKE	IN	USA	46783
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IN		Signature: Miche	Date: 11/25/2014				
C 158012		Name (type or p	Title: POA				
Processed 11/25/2014		* Electronically prov	ided signatures are accepted as original sig	natures.			