

No. <b>C 201703</b>		<b>Due no later than Mar 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> REALCARE INSURANCE MARKETING, INC. DARLENE HRANKAJ 500 W. MADISON STREET SUITE 2710 CHICAGO IL 60661		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				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
PRESIDENT	THOMAS HENRY	19310 SONOMA HWY STE A STE A	SONOMA	CA		95476
DIRECTOR	EDWARD O'MALLEY	1250 CAPITAL OF TEXAS HWY S BLDG 2.	AUSTIN	TX	USA	78746
DIRECTOR	EVAN A. MICHAEL	340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
DIRECTOR	BRETT SCHNEIDER	340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
VICE PRESIDENT	LORI M. LIESER	500 W. MADISON STREET SUITE 2710	CHICAGO	IL	USA	60661
TREASURER	THOMAS HENRY	19310 SONOMA HWY STE A	SONOMA	CA	USA	95476
SECRETARY	THOMAS HENRY	19310 SONOMA HWY STE A	SONOMA	CA	USA	95476
5. Organized Under the Laws of:  <b>CA C 201703</b>		6. Annual Report must be signed.* Signature: LORI M. LIESER Name (type or print): LORI M. LIESER  Date: 03/09/2016 Title: VICE PRESIDENT				
Processed 03/09/2016		* Electronically provided signatures are accepted as original signatures.				