

No. C 156532		Due no later than Sep 30, 2015		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDICAL PROTECTIVE FINANCE CORPORATION BARRY BECKER 5814 REED ROAD FORT WAYNE IN 46835		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	TIMOTHY J KENESEY	5814 REED ROAD	FORT WAYNE	IN	USA	46835
SECRETARY	TRENT C HEINEMEYER	5814 REED ROAD	FORT WAYNE	IN	USA	46835
DIRECTOR	TIMOTHY J KENESEY	5814 REED ROAD	FORT WAYNE	IN	USA	46835
TREASURER	DANIEL J LANDRIGAN	5814 REED ROAD	FORT WAYNE	IN	USA	46835
DIRECTOR	TRENT C HEINEMEYER	5814 REED ROAD	FORT WAYNE	IN	USA	46835
DIRECTOR	DANIEL J LANDRIGAN	5814 REED ROAD	FORT WAYNE	IN	USA	46835
5. Organized Under the Laws of: IN C 156532		6. Annual Report must be signed.* Signature: Barry Becker Name (type or print): Barry Becker Date: 07/30/2015 Title: Senior Accountant				
Processed 07/30/2015		* Electronically provided signatures are accepted as original signatures.				