

No. C 160172		Due no later than Apr 30, 2011 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. CENTRAL INSURANCE MANAGEMENT, INC. SUSAN E SIBLEY 3625 N SHERIDAN RD PEORIA IL 61633 USA		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA			
						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	
SECRETARY	MARK LUCAS	3625 N SHERIDAN RD	PEORIA	IL	USA	61633	
TREASURER	LYNN GEURIN	10101 REUNION PLACE STE. 500	SAN ANTONIO	TX	USA	78216	
DIRECTOR	CRAIG S COMEAUX	10101 REUNION PLACE STE 500	SAN ANTONIO	TX	USA	78216	
PRESIDENT	WILLIAM MEISEN	6400 SE LAKE RD, SUITE 190	PORTLAND	OR	USA	97222	
5. Organized Under the Laws of: IL C 160172		6. Annual Report must be signed.* Signature: Craig S. comeaux Name (type or print): Craig S. comeaux					
		Date: 03/08/2011 Title: Director					
Processed 03/08/2011 * Electronically provided signatures are accepted as original signatures.							