

No. <b>C 198961</b>		<b>Due no later than Jul 31, 2016</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  H&R BLOCK HEALTH INSURANCE AGENCY, INC. ONE H&R BLOCK WAY KANSAS CITY MO 64105		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
TREASURER	JOEL L CAMPBELL	ONE H&R BLOCK WAY	KANSAS CITY	MO	USA	64105	
DIRECTOR	ETHAN J HARRINGTON	ONE H&R BLOCK WAY	KANSAS CITY	MO	USA	64105	
DIRECTOR	MARK A CIARAMITARO	ONE H&R BLOCK WAY	KANSAS CITY	MO	USA	64105	
PRESIDENT	MARK A CIARAMITARO	ONE H&R BLOCK WAY	KANSAS CITY	MO	USA	64105	
SECRETARY	SCOTT W ANDREASEN	ONE H&R BLOCK WAY	KANSAS CITY	MO	USA	64105	
5. Organized Under the Laws of:  <b>DE</b> <b>C 198961</b>		6. Annual Report must be signed.*  Signature: DANIEL J WHITE Name (type or print): DANIEL J WHITE  Date: 07/18/2016 Title: ASSISTANT TREASURER					
Processed 07/18/2016		* Electronically provided signatures are accepted as original signatures.					