

|                                                                                                                                                        |                                                                                                                                                   |                                                                           |                                                                                     |       |         |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------|---------|-------------|
| No. <b>C 160110</b>                                                                                                                                    | <b>Due no later than Apr 30, 2012</b><br><b>Annual Report Form</b>                                                                                |                                                                           | 2. Registered Agent and Address <b>(NO PO BOX)</b>                                  |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>RISK PLACEMENT SERVICES, INC.<br>LISA A COYNE<br>TWO PIERCE PLACE<br>ITASCA IL 60143 |                                                                           | CORPORATION SERVICE COMPANY<br>12550 W EXPLORER DR STE 100<br>BOISE ID 83713<br>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 |
| PRESIDENT                                                                                                                                              | JOEL D CAVANESS                                                                                                                                   | TWO PIERCE PLACE                                                          | ITASCA                                                                              | IL    | USA     | 60143       |
| DIRECTOR                                                                                                                                               | JOEL D CAVANESS                                                                                                                                   | TWO PIERCE PLACE                                                          | ITASCA                                                                              | IL    | USA     | 60143       |
| DIRECTOR                                                                                                                                               | DAVID E MCGURN, JR.                                                                                                                               | TWO PIERCE PLACE                                                          | ITASCA                                                                              | IL    | USA     | 60143       |
| TREASURER                                                                                                                                              | JACK H LAZZARO                                                                                                                                    | TWO PIERCE PLACE                                                          | ITASCH                                                                              | IL    | USA     | 60143       |
| 5. Organized Under the Laws of:<br><br><b>IL</b><br><b>C 160110</b>                                                                                    | 6. Annual Report must be signed.*<br>Signature: Lisa A Coyne<br>Name (type or print): Lisa A Coyne                                                |                                                                           | Date: 03/20/2012<br>Title: Authorized Person                                        |       |         |             |
| Processed 03/20/2012                                                                                                                                   |                                                                                                                                                   | * Electronically provided signatures are accepted as original signatures. |                                                                                     |       |         |             |