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| No. C 203946 | | Due no later than Nov 30, 2016 | | 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. ALTERNATIVE RISK COMPANY ALTERNATIVE RISK COMPANY 605 SW US HWY 40 #359 BLUE SPRINGS MO 64014 | | BILL DEAL 700 W STATE ST FL 3 IDAHO DEPT OF INSURANCE BOISE ID 83702 | |
| | | | | 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 | CHAD BROWN | 605 SW US HWY 40 #359 | BLUE SPRINGS | MO | 64014 |
| SECRETARY | AMANDA BROWN | 605 SW US HWY 40 #359 | BLUE SPRINGS | MO | 64014 |
| 5. Organized Under the Laws of: MO C 203946 | | 6. Annual Report must be signed.* Signature: Chad E Brown Name (type or print): Chad E Brown Date: 12/01/2016 Title: President | | | |
| Processed 12/01/2016 | | * Electronically provided signatures are accepted as original signatures. | | | |