

No. 104217

**Idaho Corporation Annual Report Form**

ISSUED: 07-05-1994

2. Registered Agent and Office

*Return To*

Secretary of State  
Room 203, Statehouse  
P.O. BOX 83720  
Boise, ID 83720-0080

*Due No Later Than November 1, 1994*

C T CORPORATION SYSTEM  
300 NORTH 6TH STREET

1. Mailing Address -

STUDENT ASSURANCE SERVICES, INC

BOISE

ID 83701

PO BOX 196

STILLWATER

MN 55082

3. Incorporated Under The Laws

of MN

NO: 104217

\* FIRST NOTICE \*  
NO FEE REQUIRED

4. Names and Addresses of Officers and Directors

Name

Street or P.O. Address

City

State

Zip

|            |                 |                        |             |     |       |
|------------|-----------------|------------------------|-------------|-----|-------|
| President: | Mark L. Desch   | 9985 Arcola Crt.       | Stillwater, | MN. | 55082 |
| Secretary: | Gloria M. Desch | 9985 Arcola Crt.       | Stillwater, | MN. | 55082 |
| Directors: | Mark L. Desch   | 9985 Arcola Crt.       | Stillwater, | MN. | 55082 |
|            | Gloria M. Desch | 9985 Arcola Crt.       | Stillwater, | MN. | 55082 |
|            | David M. Desch  | 689 Hidden Valley Crt. | Stillwater, | MN. | 55082 |

5. Nature of Business

Insurance Administration

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name  
(Typed or Printed)

*Mark L. Desch*  
Mark L. Desch

Date

Title

8-3-94  
President