No. C 205316		Due no later than Mar 31, 2016		2. Registered Age	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. EXTENDED PROTECTION ADMINISTRATION, INC. 4450 WEAVER PKWY STE 200 WARRENVILLE IL 60555		921 S ORCHAR	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
				3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Ente		 ess Addresses of Pi	esident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MATTHEW (G WEIL	4450 WEAVER PKWY STE 200	WARRENVILLE	IL	USA	60555	
DIRECTOR			4450 WEAVER PKWY STE 200	WARRENVILLE	IL	USA	60555	
DIRECTOR	ROGERS P	FREEDLUND	4450 WEAVER PKWY STE 200	WARRENVILLE	IL	USA	60555	
TREASURER	RICHARD S	SIMMONS	4450 WEAVER PKWY STE 200	WARRENVILLE	IL	USA	60555	
PRESIDENT	ROGERS P FREEDLUND		4450 WEAVER PKWY STE 200	WARRENVILLE	IL		60555	
SECRETARY	MATTHEW (G WEIL	4450 WEAVER PKWY STE 200	WARRENVILLE	IL ,		60555	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*						
11.		Signature: RICHARD S SIMMONS			Date: 02/29/2016			
C 205316		Name (type or print): RICHARD S SIMMONS			Title: TREASURER			
Processed 02/29/20:	16	* Electronically pro	vided signatures are accepted as original s	signatures.				