

No. C 203396	Due no later than Sep 30, 2018 Annual Report Form	2. Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. LEXISNEXIS RISK SOLUTIONS FL INC. RENEE SIMONTON 1105 N MARKET ST STE 501 SUITE 501 WILMINGTON DC 19801	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	MARK V KELSEY	1000 ALDERMAN DR
SECRETARY	JULIE GOLDWEITZ	230 PARK AVE
DIRECTOR	KENNETH FOGARTY	313 WASHINGTON ST
DIRECTOR	MARK KELSEY	1000 ALDERMAN DR
DIRECTOR	JULIE GOLDWEITZ	230 PARK AVE
DIRECTOR	KENNETH THOMPSON	9443 SPRINGBORO PIKE
VICE PRESIDENT	PETER DANGOIA	313 WASHINGTON ST
VICE PRESIDENT	RENEE SIMONTON	1105 NORTH MARKET ST
TREASURER	KENNETH FOGARTY	313 WASHINGTON ST
5. Organized Under the Laws of:		
MN C 203396		
6. Annual Report must be signed.*		
Signature: renee simonton		Date: 07/31/2018
Name (type or print): renee simonton		Title: VICE PRESIDENT
Processed 07/31/2018		
* Electronically provided signatures are accepted as original signatures.		