No. C 202951		Due no later than Aug 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DIRECTOR BILL DEAL			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ART HAUSER INSURANCE, INC. JOSEPH M WORRALL 8260 NORTHCREEK DR STE 200 CINCINNATI OH 45236		IDAHO DEPARTMENT OF INSURANCE 700 W STATE ST FL 3 BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter N	ames and Busin	ess Addresses of I	President, Secretary, and Directors. Treasure	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY	JOSEPH M \	WORRALL	8260 NORTHCREEK DRIVE SUITE 20	O CINCINNATI	OH	USA	45236
PRESIDENT	KEVIN D AS	TON	8260 NORTHCREEK DR STE 200	CINCINNATI	OH	USA	45236
SECRETARY	GEORGE H	VINCENT	255 E 5TH ST STE 1900	CINCINNATI	OH	USA	45202
DIRECTOR	PAUL M. SV	VANSON	8260 NORTHCREEK DRIVE SUITE 20	O CINCINNATI	OH	USA	45236
DIRECTOR	MARJORIE V	V. HAUSER	8260 NORTHCREEK DRIVE SUITE 20	O CINCINNATI	OH	USA	45236
DIRECTOR	GARY L. MORGAN		621 EAST MEHRING WAY APT. 2209	CINCINNATI	OH	USA	45202-3532
DIRECTOR	MARK J. HA	USER	8260 NORTHCREEK DRIVE SUITE 20	0 CINCINNATI	ОН	USA	45236
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
OH C 202951		Signature: Jos	Date: 06/27/2016				
		Name (type or print): Joseph M. Worrall Title: Assistant Secretary					
Processed 06/27/2016	·	* Electronically provided signatures are accepted as original signatures.					