

No. <b>C 101421</b>		<b>Due no later than Mar 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  TOYOTA MOTOR INSURANCE SERVICES, INC. 19001 S. WESTERN AVENUE, EF-12 TORRANCE CA 90501		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				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	MICHAEL GROFF	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
SECRETARY	KATHERINE ADKINS	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
TREASURER	TOSHIAKI KAWAI	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
DIRECTOR	TOSHIAKI KAWAI	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
DIRECTOR	MICHAEL GROFF	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
DIRECTOR	CHRISTOPHER BALLINGER	19001 S. WESTERN AVENUE, EF-12	TORRANCE	CA	USA	90501
5. Organized Under the Laws of: <b>CA</b> <b>C 101421</b>		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann		Date: 02/11/2016 Title: POA		
Processed 02/11/2016		* Electronically provided signatures are accepted as original signatures.				