

No. C 173768		Due no later than Jun 30, 2018		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. GETHEALTHINSURANCE.COM AGENCY INC. 7440 WOODLAND DRIVE INDIANAPOLIS IN 46278		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	PATRICK FRANCIS CARR	7440 WOODLAND DRIVE	INDIANAPOLIS	IN	USA	46278
SECRETARY	RICHARD CHARLES SULLIVAN	7440 WOODLAND DRIVE	INDIANAPOLIS	IN	USA	46278
TREASURER	ROBERT WORTH OBERRENDER	9900 BREN ROAD EAST	MINNETONKA	MN	USA	55343
DIRECTOR	JOHN FREDERICK FRANK	7440 WOODLAND DRIVE	INDIANAPOLIS	IN	USA	46278
DIRECTOR	PATRICK FRANCIS CARR	7440 WOODLAND DRIVE	INDIANAPOLIS	IN	USA	46278
5. Organized Under the Laws of: IN C 173768		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann Date: 05/09/2018 Title: POA				
Processed 05/09/2018		* Electronically provided signatures are accepted as original signatures.				