

No. C 191914		Due no later than Aug 31, 2016		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		REGISTERED AGENT SOLUTIONS INC 921 S ORCHARD ST STE G BOISE ID 83705			
		1. Mailing Address: Correct in this box if needed. HEALTHCARE INSURANCE GROUP, INC. KAREN HEROLD 400 112TH AVE NE STE 325 BELLEVUE WA 98004		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	CHRIS RANDALL	400 112TH AVE NE STE 325	BELLEVUE	WA	USA	98004	
SECRETARY	KAREN HEROLD	400 112TH AVE NE STE 325	BELLEVUE	WA	USA	98004	
5. Organized Under the Laws of: DE C 191914		6. Annual Report must be signed.* Signature: CHRIS RANDALL Name (type or print): CHRIS RANDALL				Date: 06/23/2016 Title: PRESIDENT	
Processed 06/23/2016		* Electronically provided signatures are accepted as original signatures.					