

No. C 155372		Due no later than Jul 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WELLS FARGO INSURANCE SERVICES OF KENTUCKY, INC. KAREN JOHNSON PO BOX 1551 CHARLESTON WV 25326-1551 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
DIRECTOR	ROBERT M GRECO	150 N. MICHIGAN AVENUE	CHICAGO	IL	USA	60601	
PRESIDENT	ANDREW PATERNO	ONE HILLCREST DRIVE EAST	CHARLESTON	WV	USA	25311	
SECRETARY	ROBERT M GRECO	150 N MICHIGAN AVE	CHICAGO	IL	USA	60601-1551	
5. Organized Under the Laws of: KY C 155372		6. Annual Report must be signed.* Signature: karen Johnson Name (type or print): karen Johnson Date: 05/26/2009 Title: Licensing coordinator					
Processed 05/26/2009 * Electronically provided signatures are accepted as original signatures.							