No. **C 186896**	**Due no later than Apr 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.** HCC PUBLIC RISK CLAIM SERVICE, INC. 1700 OPDYKE CT AUBURN HILLS MI 48326	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New 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	THOMAS HARMEYER	13403 NORTHWEST FREEWAY	HOUSTON	TX	USA	77040
SECRETARY	ALEXANDER LUDLOW	13403 NORTHWEST FREEWAY	HOUSTON	TX	USA	77040
TREASURER	JONATHAN LEE	13403 NORTHWEST FREEWAY	HOUSTON	TX	USA	77040
DIRECTOR	BRAD T. IRICK	13403 NORTHWEST FREEWAY	HOUSTON	TX	USA	77040
DIRECTOR	CHRISTOPHER J.B. WILLIAMS	25510 RIVER ROAD	CLOVERDALE	CA	USA	95425

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
MI **C 186896**	Signature: Kelly Lettmann Name (type or print): Kelly Lettmann	Date: 03/28/2018 Title: POA
Processed 03/28/2018	* Electronically provided signatures are accepted as original signatures.	