

No. C 104217	Due no later than Dec 31, 2012 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. STUDENT ASSURANCE SERVICES, INC. MARK L DESCH PO BOX 196 STILLWATER MN 55082 USA	CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA 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	MARK L DESCH	9985 ARCOLA CRT	STILLWATER	MN	USA	55082
DIRECTOR	GLORIA M DESCH	9985 ARCOLA CRT	STILLWATER	MN	USA	55082
TREASURER	DAVID M DESCH	689 HIDDEN VALLEY CRT	STILLWATER	MN	USA	55082
PRESIDENT	MARK L DESCH	9985 ARCOLA CRT	STILLWATER	MN	USA	55082
SECRETARY	GLORIA M DESCH	9985 ARCOLA CRT	STILLWATER	MN	USA	55082
5. Organized Under the Laws of: MN C 104217	6. Annual Report must be signed.* Signature: Mark L Desch Name (type or print): Mark L Desch		Date: 12/26/2012 Title: President/Director			
Processed 12/26/2012		* Electronically provided signatures are accepted as original signatures.				