No. C 183655		Due no later than Jun 30, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. INSPHERE INSURANCE SOLUTIONS, INC. PEGGY G SIMPSON 9151 BLVD 26 NORTH RICHLAND HILLS TX 76180		2. Registered Age	2. Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				921 S ORCHARI BOISE ID 837 USA				
4. Corporations: Ent	ter Names and Busin	ess Addresses of	President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	R SCOTT D	ONOVAN	9151 BLVD 26	NORTH RICHLAND HILLS	TX	USA	76180	
PRESIDENT	KENNETH J	FASOLA	9151 BLVD 26	NORTH RICHLAND HILLS	TX	USA	76180-5605	
SECRETARY	PEGGY G SI	MPSON	9151 BLVD 26	NORTH RICHLAND HILLS	TX	USA	76180-5605	
DIRECTOR	KENNETH J	FASOLA	9151 BLVD 26	NORTH RICHLAND HILLS	TX	USA	76180-5605	
DIRECTOR	MARK H SM	ITH	9151 BLVD 26	NORTH RICHLAND HILLS	TX	USA	76180-5605	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Peggy G Simpson			Date: 04/14/2014			
C 183655		Name (type or print): Peggy G Simpson			Title: Secretary			
Processed 04/14/20	14	* Electronically p	rovided signatures are accepted as origin	al signatures.				