No. C 195436		Due no later than Jul 31, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		NATIONAL CORPORATE RESEARCH LT			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HEALTH SPECIAL RISK, INC. 4100 MEDICAL PARKWAY CARROLLTON TX 75007		921 S ORCHARD ST STE G BOISE ID 83706 USA 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter	Names and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	THOMAS J	LENHIAN	4100 MEDICAL PARKWAY	CARROLLTON	TX	USA	75007
DIRECTOR	THOMAS J	LENHIAN	4100 MEDICAL PARKWAY	CARROLLTON MENDOTA HEIGHTS	TX	USA	75007
SECRETARY	PHILIP K MI	JNSON	880 SIBLEY MEMORIAL HWY, #101		MN	USA	55118
DIRECTOR	PHILIP K MUNSON		880 SIBLEY MEMORIAL HWY, #101	MENDOTA HEIGHTS	MN	USA	55118
5. Organized Under the Laws of:		6. Annual Report n	nust be signed.*				
MN C 195436		Signature: Thomas J. Lenhian		Date: 07/30/2013			
		Name (type or print): Thomas J. Lenhian		Title: President & Cfo & Director			
Processed 07/30/2013		* Electronically prov	rided signatures are accepted as original sign	natures.	_		