

No. C 195436		Due no later than Jul 31, 2016		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. HEALTH SPECIAL RISK, INC. THOMAS J. LENHIAN 4100 MEDICAL PARKWAY CARROLLTON TX 75007		NATIONAL CORPORATE RESEARCH LT 921 S ORCHARD ST STE G BOISE ID 83705		
				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
PRESIDENT	THOMAS J LENHIAN	4100 MEDICAL PARKWAY	CARROLLTON	TX	USA	75007
DIRECTOR	THOMAS J LENHIAN	4100 MEDICAL PARKWAY	CARROLLTON	TX	USA	75007
SECRETARY	PHILIP K MUNSON	880 SIBLEY MEMORIAL HWY, #101	MENDOTA HEIGHTS	MN	USA	55118
DIRECTOR	PHILIP K MUNSON	880 SIBLEY MEMORIAL HWY, #101	MENDOTA HEIGHTS	MN	USA	55118
5. Organized Under the Laws of: MN C 195436		6. Annual Report must be signed.* Signature: Thomas J. Lenhian Name (type or print): Thomas J. Lenhian		Date: 07/07/2016 Title: President		
Processed 07/07/2016		* Electronically provided signatures are accepted as original signatures.				