No. <b>C 144805</b>		Due no later than Jul 31, 2012		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.  ASURION INSURANCE SERVICES, INC.  WILLIAM CULROSS  648 GRASSMERE PARK  SUITE 300  NASHVILLE TN 37211  USA		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA  3. New Registered Agent Signature:*			
4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER DIRECTOR DIRECTOR PRESIDENT DIRECTOR SECRETARY	WILLARD J KEVIN M TA GERALD A F CHARLES A CHARLES A GUSTAVUS	AWEEL RISK LAUE	648 GRASSMERE PARK SUITE 300 160 BOVET ROAD SUITE 402 160 BOVET ROAD SUITE 402 8880 WARD PARKWAY 8880 WARD PARKWAY 648 GRASSMERE PARK SUITE 300	NASHVILLE SAN MATEO SAN MATEO KANSAS CITY KANSAS CITY NASHVILLE	TN CA CA MO MO TN	USA USA USA USA USA USA	37211 94402 94402 64114 64114 37211
5. Organized Under the Laws of:		6. Annual Report must					
TN C 144805		Signature: Charles A Laue		Date: 06/14/2012			
		Name (type or print)		Title: President			
Processed 06/14/2012		* Electronically provided	d signatures are accepted as original sign	natures.		_	