

No. C 73315	Due no later than Jul 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) WILLA SULLIVAN 6839 W RUSSETT BOISE ID 83704	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. RISK MANAGEMENT SPECIALISTS, INC. 6839 W RUSSETT BOISE ID 83704		3. <u>New</u> Registered Agent Signature.	

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Willa J Sullivan	6839 W. Russett	Boise	ID	ADA	83704

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;"> IDAHO C 73315 </div>	6. <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;"> Signature: <u>Willa J Sullivan</u> </td> <td style="width: 30%;"> Date: <u>7/2/2011</u> </td> </tr> <tr> <td> Name (type or print): <u>Willa J. Sullivan</u> </td> <td> Title: <u>President</u> </td> </tr> </table>	Signature: <u>Willa J Sullivan</u>	Date: <u>7/2/2011</u>	Name (type or print): <u>Willa J. Sullivan</u>	Title: <u>President</u>
Signature: <u>Willa J Sullivan</u>	Date: <u>7/2/2011</u>				
Name (type or print): <u>Willa J. Sullivan</u>	Title: <u>President</u>				

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