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| No. C 194770 | | Due no later than May 31, 2018 | | 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. TOMPKINS INSURANCE AGENCIES, INC. DON HERMAN 90 MAIN STREET BATAVIA NY 14020 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 | | |
| | | | | 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 |
| TREASURER | DON H HERMAN | 90 MAIN STREET | BATAVIA | NY | USA | 14020 |
| PRESIDENT | DAVID S BOYCE | 90 MAIN STREET | BATAVIA | NY | USA | 14020 |
| SECRETARY | SUZANNE WINKELMAN | 90 MAIN STREET | BATAVIA | NY | USA | 14020 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| NY C 194770 | | Signature: Don Herman | | Date: 05/10/2018 | | |
| | | Name (type or print): Don Herman | | Title: TREASURER | | |
| Processed 05/10/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | |