No. <b>C 137263</b>	Due no later than Jan 31, 2011	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	CT CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  TOTAL FINANCIAL & INSURANCE SERVICES, INC.  DARLENE HRANKAJ NFP  500 W MADISON ST STE 2400  CHICAGO IL 60661	1111 W JEFFERSON STE 530 BOISE ID 83702 USA  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	1.00 1.22.20 1.22.20				
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
DIRECTOR JAMES R. C DIRECTOR MALIKA S. PRESIDENT MARTIN GR SECRETARY LISA GREEN DIRECTOR BRETT SCH TREASURER LISA GREEN	HINKSON 340 MADISON AVENUE 20TH FLOOR EENBERG 11835 WEST OLYMPIC BLVD SUITE 60 BERG 11835 WEST OLYMPIC BLVD SUITE 60 NEIDER 340 MADISON AVENUE 20TH FLOOR	NEW YORK 00 LOS ANGELES 00 LOS ANGELES NEW YORK	NY NY CA CA NY CA	USA USA USA USA USA USA	10173 10173 90064 90064 10173 90064
5. Organized Under the Laws of:  CA C 137263	6. Annual Report must be signed.* Signature: Lori M. Lieser Name (type or print): Lori M. Lieser		01/12/2 Vice Pre		

 $\ensuremath{^{*}}$  Electronically provided signatures are accepted as original signatures.

Processed 01/12/2011