



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. ID No. 000521160

2. Exact Name of the Limited Liability Company Asurion Roadside Assistance Services, LLC

3. State of Formation

State: TX

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Operation of a motor club which provides emergency road services to its members.

5. Principal Office Address

No. and Street: 140 CYPRESS STATION DRIVE
SUITE 300

City or Town: HOUSTON

State: TX Zip: 77090 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: DAN CULROSS Contact Title: SR. LICENSING COORDINATOR

No. and Street: 8880 WARD PARKWAY
5TH FLOOR

City or Town: KANSAS CITY

State: MO Zip: 64114 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	KEVIN MICHAEL TAWHEEL	160 BOVET ROAD, SUITE 402 SAN MATEO, CA 94402 USA
MANAGER	GERALD ALAN RISK	648 GRASSMERE PARK, SUITE 300 NASHVILLE, TN 37211 USA
MANAGER	CHARLES ALAN LAUE	8880 WARD PARKWAY KANSAS CITY, MO 64114 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL REGISTERED AGENTS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 5 Day of August, 2011 at 10:18:59 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CHARLES A LAUE
Signature of Authorized Person

Form No. 632
Revised 09/07

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