STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 ● Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
113169	Home Security of America, Inc.			
3. Street Address Principal Business Office		City	State	Zip
310 NORTH MIDVALE BOULEVARD STE 300		MADISON	WI	53705-3265
4. Business Phone No.	5. State of Incorporation			6. SIC Code
6082310010	WISCONSIN			5313
7. Brief Description of the Character of Business Conducted in Rhode Island				
ADMINISTRATION AND ISSUANCE OF HOME WARRANTY CONTRACTS.				

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Robert J Lehmann	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Vice President Name	**Street Address**	**City**	**State**	**Zip**
Michael F Clear	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Secretary Name	**Street Address**	**City**	**State**	**Zip**
Darlene F Schwab	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Treasurer Name	**Street Address**	**City**	**State**	**Zip**
Steven P Dedo	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Robert J Lehmann	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Director Name	**Street Address**	**City**	**State**	**Zip**
David R Lehmann	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Director Name	**Street Address**	**City**	**State**	**Zip**
Michael F Clear	310 N Midvale Blvd Ste 300	Madison	WI	53705-3265
Director Name	**Street Address**	**City**	**State**	**Zip**

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐ **11. SHARES ISSUED** *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
20,000 COMM NO PAR VALUE			18,995	Common	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] 113169 [redacted]

113169 FBC 08/29/05 11:14:57 AM
File Date 9/2/05
Check No. 84175
By: JM
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer — *Date* 8/29/05

Steven P Dedo
Print or Type Name of Officer

[redacted] Treasurer
Title of Officer

Form 630 12/01

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 ● Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
113169	Home Security of America, Inc.			
3. Street Address Principal Business Office		City	State	Zip
310 NORTH MIDVALE BOULEVARD		MADISON	WI	53705-
4. Business Phone No.	5. State of Incorporation			6. SIC Code
6082310010	WISCONSIN			5744
7. Brief Description of the Character of Business Conducted in Rhode Island				
ADMINISTRATION AND ISSUANCE OF HOME WARRANTY CONTRACTS.				

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Robert J Lehmann	310 North Midvale Blvd	Madison	WI	53705

Vice President Name	Street Address	City	State	Zip
Michael Clear	310 North Midvale Blvd	Madison	WI	53705

Secretary Name	Street Address	City	State	Zip
Darlene Schwab	310 North Midvale Blvd	Madison	WI	53705

Treasurer Name	Street Address	City	State	Zip
Steven P Dedo	310 North Midvale Blvd	Madison	WI	53705

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Robert J Lehmann	310 North Midvale Blvd	Madison	WI	53705

Director Name	Street Address	City	State	Zip
Michael Clear	310 North Midvale Blvd	Madison	WI	53705

Director Name	Street Address	City	State	Zip
David R Lehmann	310 North Midvale Blvd	Madison	WI	53705

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐ **11. SHARES ISSUED** *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	*Class/Series*	*Par Value*	*Number of Shares*	*Class/Series*	*Par Value*
20,000	COMM	NO PAR VALUE	18,995.00		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] 1 1 3 1 6 9 [redacted]

113169 FBC 02/19/04 02:26:42 PM
File Date 2/23/04
Check No. 80543
By: SC
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer S. P. Dedo *Date* 9-19-04

Print or Type Name of Officer Steven P. Dedo

[redacted] *Title of Officer* Treasurer - CFO

Form 630 12/01

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

STOP
PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1–March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.: 113169
2. Name of Corporation: Home Security of America, Inc.
3. Street Address Principal Business Office: 310 N MIDVALE BLVD
   City: MADISON State: WI Zip: 53705
4. Business Phone No.: 608 231-6010
5. State of Incorporation: WISCONSIN
6. SIC Code: 5734
7. Brief Description of the Character of Business Conducted in Rhode Island: SALE & ADMINISTRATION OF HOME WARRANTIES

8. NAMES AND ADDRESSES OF THE OFFICERS (*"X" BOX FOR ATTACHMENT*) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: ROBERT J LEHMANN
Street Address: 5160 SPRING COURT
City: MADISON State: WI Zip: 53705

Vice President Name: MICHAEL CLEAR
Street Address: 4177 ROSE COURT
City: MIDDLETON State: WI Zip: 53562

Secretary Name: DARLENE SCHWAB
Street Address: 21 YORKTOWN CIR
City: MADISON State: WI Zip: 53711

Treasurer Name: STEVE DEAC
Street Address: 415 CHESTNUT RIDGE
City: SPRING GROVE State: IL Zip: 60081

9. NAMES AND ADDRESSES OF THE DIRECTORS (*"X" BOX FOR ATTACHMENT*) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name: ROBERT J LEHMANN
Street Address: 5160 SPRING COURT
City: MADISON State: WI Zip: 53705

Director Name: MICHAEL CLEAR
Street Address: 4177 ROSE COURT
City: MIDDLETON State: WI Zip: 53562

Director Name: DAVID R LEHMANN
Street Address: 1613 RAE LANE
City: MADISON State: WI Zip: 53711

Director Name:
Street Address:
City: State: Zip:

10. SHARES AUTHORIZED (*"X" BOX FOR ATTACHMENT*)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
20,000	COMM	NO PAR VALUE

11. SHARES ISSUED (*"X" BOX FOR ATTACHMENT*)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
18,995		

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

113169

File Date: 3.3.03

Check No.: 74394

By: LP

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer 2/26/03 *Date*

MICHAEL CLEAR
Print or Type Name of Officer

VICE PRESIDENT
Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 113169
2. Name of Corporation: Home Security of America, Inc.
3. Street Address Principal Business Office: 310 N. MOORLAD BLVD
   City: MADISON State: WI Zip: 53705
4. Business Phone No.: (608) 231-0010
5. State of Incorporation: WISCONSIN
6. SIC Code: 5944
7. Brief Description of the Character of Business Conducted in Rhode Island: ADMINISTRATION & ISSUANCE OF HOME WARRANTIES

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name: ROBERT J. LEHMANN	Vice President Name: MICHAEL CLEAR
Street Address: 5160 SPRING COURT	Street Address: 4209 REDTAIL PASS
City: MADISON State: WI Zip: 53705	City: MIDDLETON State: WI Zip: 53562
Secretary Name: DARLENE SCHWAB	Treasurer Name: STEVE OLSON
Street Address: 21 YORKTOWN CIRCLE	Street Address: 415 CHESTNUT RIDGE
City: MADISON State: WI Zip: 53711	City: SPRING GROVE State: IL Zip: 60081

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name: ROBERT J. LEHMANN	Director Name: MICHAEL CLEAR
Street Address: 5160 SPRING COURT	Street Address: 4209 REDTAIL PASS
City: MADISON State: WI Zip: 53705	City: MIDDLETON State: WI Zip: 53562
Director Name: DAVID R. LEHMANN	Director Name:
Street Address: 1613 RAE LANE	Street Address:
City: MADISON State: WI Zip: 53711	City: State: Zip:

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
20,000	COMM	NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
18,995		NO PAR

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

* 1 1 3 1 6 9 *

File Date: 2-25-02

Check No.: 67117

By:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer — Date

Print or Type Name of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Divisi
100 North Main Street, Providence, RI 02903-13
401-222-30

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
113169	Home Security of America, Inc.			
3. Street Address Principal Business Office		City	State	Zip
310 N MIOVALE BLVD		MADISON	WI	53705
4. Business Phone No.	5. State of Incorporation			6. SIC Code
(608) 231-0010	WISCONSIN			
7. Brief Description of the Character of Business Conducted in Rhode Island				
ADMINISTRATION AND SALE OF HOME WARRANTIES				

8. NAMES AND ADDRESSES OF THE OFFICERS (*"X" BOX FOR ATTACHMENT*) **X FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
ROBERT J. LEHMANN	5160 SPRING CT	MADISON	WI	53705

Vice President Name	Street Address	City	State	Zip
JEFFREY C. MOON	19 WARWICK RD	WINNETKA	IL	60093

Secretary Name	Street Address	City	State	Zip
SALLY B. NAREY	237 E. DELAWARE	CHICAGO	IL	6061

Treasurer Name	Street Address	City	State	Zip
ROBERT J. LEHMANN	5160 SPRING COURT	MADISON	WI	53705

9. NAMES AND ADDRESSES OF THE DIRECTORS (*"X" BOX FOR ATTACHMENT*) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
ROBERT J. LEHMANN	5160 SPRING CT	MADISON	WI	53705

Director Name	Street Address	City	State	Zip
JEFFREY C. MOON	19 WARWICK RD	WINNETKA	IL	60093

Director Name	Street Address	City	State	Zip
ROBERT C. RITCHIE	212 TAYLOR AVE	GLEN ELLYN	IL	60137

Director Name	Street Address	City	State	Zip
RUSSELL O MADORE	3619 FALKNER DRIVE	NAPERVILLE	IL	60564

10. SHARES AUTHORIZED (*"X" BOX FOR ATTACHMENT*) ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
20,000 COMM NO PAR VALUE		

11. SHARES ISSUED (*"X" BOX FOR ATTACHMENT*) ☐

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
18,995		

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste

[redacted]

113169

4-9-01

File Date:

Check No.: 59285

By: Q

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer — Date: 8/22/01

ROBERT J. LEHMANN
Print or Type Name of Officer

PRESIDENT & CEO

HOME SECURITY OF AMERICA, INC.

Corporate Officers

Name Social Security #	Title	Address
Robert J. Lehmann 330-38-7869	President & CEO	5160 Spring Ct. Madison, WI 53705
Jeffrey C. Moon 150-38-2396	Executive Vice President	19 Warwick Rd. Winnetka, IL 60093
Robert C. Ritchie 402-96-5399	Senior Vice President	212 Taylor Ave. Glen Ellyn, IL 60137
John J. Sullivan 325-36-6246	Group Vice President	14831 S. 88th Ave. Orland Park, IL 60462
Sally B. Narey 479-56-4056	Secretary & Group V.P.	237 E. Delaware Chicago, IL 60611
Mary Ribikawskis 319-54-6306	Assistant Secretary	821 Kingston Land Bartlett, IL 60103
Darlene F. Schwab 485-70-8436	Assistant Secretary	21 Yorktown Circle Madison, WI 53711

Directors

Robert J. Lehmann 330-38-7869	President & CEO	5160 Spring Ct. Madison, WI 53705
Jeffrey C. Moon 150-38-2396	Executive Vice President	19 Warwick Rd. Winnetka, IL 60093
Robert C. Ritchie 402-96-5399	Senior Vice President	212 Taylor Ave. Glen Ellyn, IL 60137
Russell D. Madore 153-54-9623	Director	3619 Falkner Drive Naperville, IL 60564
Sally B. Narey 479-56-4056	Group Vice President	237 E. Delaware Chicago, IL 60611