

1.) CORPORATION NAME:

N.E.W. Customer Protection Company, Inc.

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1789397**

5.) STOCK INFORMATION

| | |
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| CLASS | AUTHORIZED |
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GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 SOUTH WACKER DRIVE
SUITE 1350

CITY/ST/ZIP: CHICAGO, IL 60606

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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|-----------------|---------------------------------|---|-----------------------------------|
| NAME: | MATTHEW FRANKEL | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 22660 EXECUTIVE DRIVE | | |
| CITY/ST/ZIP/CO: | SUITE 122 STERLING, VA 20166 | | |

| | | | |
|-----------------|--------------------------------|---|--|
| NAME: | Kevin Taweel | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CHAIRMAN | | |
| ADDRESS: | 160 Bovet Road | | |
| CITY/ST/ZIP/CO: | Ste 402 San Mateo, CA 94402 | | |

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|-----------------|--------------------------------|---|--|
| NAME: | Steve Ellis | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CEO | | |
| ADDRESS: | 160 Bovet Rd | | |
| CITY/ST/ZIP/CO: | Ste 402 San Mateo, CA 94402 | | |

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|-----------------|--------------------------------|---|--|
| NAME: | Mark Gunning | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VP and CFO | | |
| ADDRESS: | 648 Grassmere | | |
| CITY/ST/ZIP/CO: | Ste 100 Nashville, TN 37211 | | |

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|-----------------|------------------------------------|---|-----------------------------------|
| NAME: | Charles Laue | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 8880 Ward Parkway | | |
| CITY/ST/ZIP/CO: | 5th Floor Kansas City, MO 64114 | | |

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|-----------------|---------------------|---|-----------------------------------|
| NAME: | Gustavus Puryear IV | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 648 Grassmere Park | | |
| | Ste 100 | | |
| CITY/ST/ZIP/CO: | Nashville, TN 37211 | | |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

| | | |
|---|----------------------------------|-----------|
| /s/ MATTHEW FRANKEL | MATTHEW FRANKEL, PRESIDENT | 5/14/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.