

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000824

Entity Name: KAR AUCTION SERVICES, INC.**Current Principal Place of Business:**13085 HAMILTON CROSSING BLVD.
CARMEL, IN 46032**Current Mailing Address:**13085 HAMILTON CROSSING BLVD.
CARMEL, IN 46032**FEI Number:** 20-8744739**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HALLETT, JAMES P.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name FORMANEK, PETER R.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name ECTON, DONNA R.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title PRESIDENT
Name KELLY, PETER
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title SECRETARY
Name POLAK, REBECCA C.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name KESTNER, MICHAEL T.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name SMITH, STEPHEN E.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name HILL, MARK E.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REBECCA C. POLAK**SECRETARY****03/23/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LARSON, JOHN P.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name HOWELL, J. MARK
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title CHIEF FINANCIAL OFFICER
Name LOUGHMILLER, ERIC M.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name JOLLIFFE, LYNN
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032

Title DIRECTOR
Name BOURELL, TODD F.
Address 13085 HAMILTON CROSSING BLVD.
City-State-Zip: CARMEL IN 46032