2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008
Secretary of State

DOCUMENT# F00000004065

Entity Name: INSURANCENOODLE, INC.

Current Principal Place of Business:

26 CENTURY BOULEVARD
NASHVILLE, TN 37214

New Principal Place of Business:

Current Mailing Address:

26 CENTURY BOULEVARD
NASHVILLE, TN 37214

New Mailing Address:

26 CENTURY BOULEVARD
C/O HOLLY G MURPHY
NASHVILLE, TN 37214

FEI Number: 36-4364587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
% C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: URBANCIZ, DONALD
Address: 11 SOUTH LASALLE ST., 6TH FL
City-St-Zip: CHICAGO, IL 60603

Title: CEO ( ) Delete
Name: EMMERSON, KATHRYN
Address: 11 SOUTH LASALLE ST., 6TH FL
City-St-Zip: CHICAGO, IL 60603

Title: S ( ) Delete
Name: ADELMAN, TIMOTHY
Address: 11 SOUTH LASALLE ST., 6TH FL
City-St-Zip: CHICAGO, IL

Title: D ( ) Delete
Name: KALISH, GEOFFREY
Address: 27 LYONS PLACE
City-St-Zip: LARCHMONT, NY 10538

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change ( ) Addition
Name: ADELMAN, TIMOTHY
Address: 11 SOUTH LASALLE ST., 6TH FL
City-St-Zip: CHICAGO, IL

Title: D (X) Change ( ) Addition
Name: CAIAZZO, MARY
Address: ONE WORLD FINANCIAL CENTER, 200 LIBERTY ST
City-St-Zip: NEW YORK, NY 10281

Title: S ( ) Change (X) Addition
Name: MURPHY, HOLLY G
Address: 26 CENTURY BLVD.
City-St-Zip: NASHVILLE, TN 32714

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HOLLY G MURPHY S 03/13/2008

Electronic Signature of Signing Officer or Director — Date