
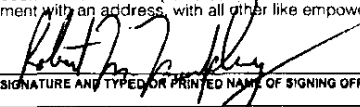


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT


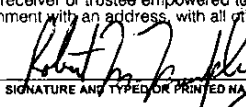
**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90821 029 \*\*\*150.00

<b>DOCUMENT # F03000001338</b>					
<b>1. Entity Name</b> DISCOVER FINANCIAL SERVICES INSURANCE AGENCY, INC.					
<b>Principal Place of Business</b> 2500 LAKE COOK ROAD RIVERWOODS, IL 60015			<b>Mailing Address</b> 2500 LAKE COOK ROAD RIVERWOODS, IL 60015		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 75-3077351	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> STOLBOF, EDWARD 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>VTAS</b> SLUSARZ, MARTIN W 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> LAMANTIA, VICTOR A 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input checked="" type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	Karin Giffney <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> GREENE, D. CHRISTOPHER 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> MARTIN, JANET 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> CORLEY, KATHRYN M 2500 LAKE COOK RD RIVERWOODS, IL 60015 <input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b>				Robert M. Murphy	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/17/07		224-405-1179	

# ATTACHMENT

## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # F03000001338</b>					
<b>1. Entity Name</b> DISCOVER FINANCIAL SERVICES INSURANCE AGENCY, INC.					
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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 75-3077351	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;">FL</span> Zip Code		
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> P	<b>NAME</b> STOLBOF, EDWARD		<b>TITLE</b> 	<b>NAME</b> 	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>TITLE</b> VTAS	<b>NAME</b> SLUSARZ, MARTIN W		<b>TITLE</b> 	<b>NAME</b> 	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>TITLE</b> V	<b>NAME</b> LAMANTIA, VICTOR A		<b>TITLE</b> 	<b>NAME</b> Karin Giffney	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>TITLE</b> S	<b>NAME</b> GREENE, D. CHRISTOPHER		<b>TITLE</b> 	<b>NAME</b> 	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>TITLE</b> D	<b>NAME</b> MARTIN, JANET		<b>TITLE</b> 	<b>NAME</b> 	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>TITLE</b> D	<b>NAME</b> CORLEY, KATHRYN M		<b>TITLE</b> 	<b>NAME</b> 	
<b>STREET ADDRESS</b> 2500 LAKE COOK RD	<b>CITY-ST-ZIP</b> RIVERWOODS, IL 60015		<b>STREET ADDRESS</b> 	<b>CITY-ST-ZIP</b> 	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> 		Robert M. Murphy		4/17/07	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		224-405-1179	

40092231

Please acknowledge receipt of the return on this page marked "COPY" and return it in the enclosed self-addressed, stamped envelope.

# ATTACHMENT

40092231

#F03000001338

DISCOVER FINANCIAL SERVICES INSURANCE AGENCY, INC.

## LIST OF OFFICERS AND DIRECTORS

<u>NAME AND TITLE</u>	<u>BUSINESS ADDRESS</u>
EDWARD STOLBOF PRESIDENT/DIRECTOR	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
MARTIN W. SLUSARZ VICE PRESIDENT, TREASURER ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
KARIN GIFFNEY VICE PRESIDENT, INSURANCE OFFICER DIRECTOR	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
KATHRYN MCNAMARA CORLEY DIRECTOR	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
CHRISTOPHER GREENE SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
LINDA CHIRON ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, IL 60015
GERALD M. EGNER ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
ROBERT M. MURPHY ASSISTANT SECRETARY	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
DOROTHY A. MURDOCK INSURANCE OFFICER/COMPLIANCE OFFICER	2500 LAKE COOK ROAD RIVERWOODS, ILLINOIS 60015
KELLY L. SANCHEZ INSURANCE OFFICER	12 READ'S WAY NEW CASTLE, DE 19720
JOHN BYUNG-KOOK YOO INSURANCE OFFICER	12 READ'S WAY NEW CASTLE, DE 19720