2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001338

Entity Name: DISCOVER FINANCIAL SERVICES INSURANCE AGENCY, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2500 LAKE COOK ROAD RIVERWOODS, IL 60015					
Current Mailing Address:			New Mailing Address:		
2500 LAKE COOK ROAD RIVERWOODS, IL 60015					
FEI Number: 7	75-3077351	FEI Number Applied For () FEI Num	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () D STOLBOF, EDW/ 2500 LAKE COOI RIVERWOODS, I	K RD	Title: Name: Address: City-St-Zip:	P (X) Change () Addition SCARBOROUGH, MARK 2500 LAKE COOK RD RIVERWOODS, IL 60015	
Title: Name: Address: City-St-Zip:	VTAS () D SLUSARZ, MART 2500 LAKE COOI RIVERWOODS, I	KRD	Title: Name: Address: City-St-Zip:	VTAS (X) Change () Addition GUTHRIE, ROY 2500 LAKE COOK RD RIVERWOODS, IL 60015	
Title: Name: Address: City-St-Zip:	V () C GIFFNEY, KARIN 2500 LAKE COOI RIVERWOODS, I	K RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () C GREENE, D. CHF 2500 LAKE COOI RIVERWOODS, I	K RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C MARTIN, JANET 2500 LAKE COOI RIVERWOODS, I		Title: Name: Address: City-St-Zip:	AS (X) Change () Addition HENGESH, DAVID W 2500 LAKE COOK ROAD RIVERWOODS, IL 60015	
Title: Name: Address: City-St-Zip:	D () C CORLEY, KATHR 2500 LAKE COOI RIVERWOODS, I	K RD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DAVID W. HENGESH AS 04/15/2009