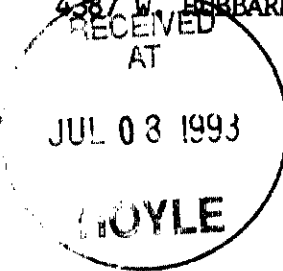


No. 01526	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ★ FIRST NOTICE ★ NO FEE REQUIRED	Due No Later Than November 1, 1993		RICK W HOYLE 210 W. MALLARD DR.																									
	1 Mailing Address: <i>(Please Print or Type)</i> HOYLE & ASSOCIATES INSURANCE, I RICK W HOYLE 210 W. MALLARD DR.		BOISE ID 83706																									
	BOISE ID 83706		3. Incorporated Under The Laws of ID NO: 01526																									
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED																												
<table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>RICHARD W. HOYLE</td> <td>976 EAST RIVERPARK LANE</td> <td>BOISE</td> <td>IDAHO</td> <td>83706</td> </tr> <tr> <td>Secretary:</td> <td>DEBORAH A. WISCOMBE</td> <td>4387 W. HARBARD ROAD</td> <td>KUNA</td> <td>IDAHO</td> <td>83634</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> 						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	RICHARD W. HOYLE	976 EAST RIVERPARK LANE	BOISE	IDAHO	83706	Secretary:	DEBORAH A. WISCOMBE	4387 W. HARBARD ROAD	KUNA	IDAHO	83634	Directors:					
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Directors:																												
5. Nature of Business INSURANCE		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td><i>(Typed or Printed)</i> RICHARD W. HOYLE</td> <td>8-6-93</td> </tr> <tr> <td>Title</td> <td>PRESIDENT</td> </tr> </table>			Signature	Date	<i>(Typed or Printed)</i> RICHARD W. HOYLE	8-6-93	Title	PRESIDENT																		
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