

No. C 131815		Due no later than Dec 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. DAVIES INSURANCE SERVICES, INC. MICHAEL A DAVIES 450 W STATE ST STE 125 EAGLE ID 83616		MICHAEL A DAVIES 450 W STATE ST STE 125 EAGLE 83616			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ANGELA D DAVIES	450 W STATE ST, STE 125	EAGLE	ID	USA	83616	
PRESIDENT	MICHAEL A DAVIES	450 W STATE ST, STE. 125	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID C 131815		6. Annual Report must be signed.* Signature: Angela Davies Name (type or print): Angela Davies					
		Date: 10/14/2014 Title: Secretary					
Processed 10/14/2014		* Electronically provided signatures are accepted as original signatures.					