

No. C 155775	Due no later than July 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable KIMBALL FAMILY INSURANCE, INC. KELLY D KIMBALL 1978 N TRAIL CREEK WAY EAGLE, ID 83616		KELLY KIMBALL 1978 N TRAIL CREEK WAY EAGLE, ID 83616
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
Pres.	Kenneth Kimball	1978 N Trail Creek	Eagle ID 83616
Sec/Treas	Kelly Kimball	1978 N. Trail Creek	Eagle ID 83616
5. Organized Under the Laws of: IDAHO C 155775		6. Signature <u>Kelley D. Kimball</u> Date <u>5-21-07</u> Name <small>(Typed or Printed)</small> <u>Kelley D. Kimball</u> Title <u>Sec/Treas</u>	

Issued 05/01/2007

Do Not Tape or Staple

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