

No. C 139089

Due no later than May 31, 2008
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

MURRAY INSURANCE, INC.
DAVID J. MURRAY
302 THAIN RD STE ~~X~~ D
LEWISTON, ID 83501DAVID J. MURRAY
302 THAIN RD STE A
LEWISTON, ID 83501NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

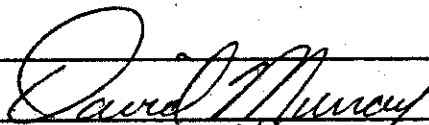
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	David Murray	2215 Schaefer Dr	Clarkston	WA	99403
Sec/Tres	Kristi Murray	2215 Schaefer Dr	Clarkston	WA	99403

5. Organized Under the Laws of:

IDAHO
C 139089

6.

Signature



Date

3/10/08

Name (Typed or Printed)

David Murray

Title

President

Issued 03/03/2008

Do Not Tape or Staple

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