

<b>No. W 9385</b>	<b>Due no later than July 31, 2008</b> <b>Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>  DEL MCNARY <del>378 S FREEMAN</del> <b>740 John Adams Pkwy</b> IDAHO FALLS, ID 83401																		
Return to: <b>SECRETARY OF STATE</b> <b>450 NORTH FOURTH STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>	<b>KRUSE INSURANCE OF IDAHO FALLS, LLC</b> <b>PO BOX 1643</b> <b>IDAHO FALLS, ID 83403</b>	<b>3. New Registered Agent Signature</b>																		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>																				
<b>4. Limited Liability Companies: Enter Names and Addresses of Members.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>DEL MCNARY</td> <td>740 JOHN ADAMS PKWY</td> <td>IDA FALLS</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Sec'y</td> <td>BETSEY MCNARY</td> <td>740 JOHN ADAMS PKWY</td> <td>IDA FALLS</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	DEL MCNARY	740 JOHN ADAMS PKWY	IDA FALLS	ID	83401	Sec'y	BETSEY MCNARY	740 JOHN ADAMS PKWY	IDA FALLS	ID	83401
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<b>5. Organized Under the Laws of:</b>  IDAHO W 9385	<b>6.</b> Signature <u>Del McNary</u> Date <u>5/9/08</u> Name (Typed or Printed) <u>DEL MCNARY</u> Title <u>PRES.</u>																			

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