

No. C 164103

Due no later than December 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

HOLMES INSURANCE AGENCY, INC.
1211 MAIN ST STE 1
SALMON, ID 83467SHAYNE A HOLMES
1211 MAIN ST STE 1
SALMON, ID 83467NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

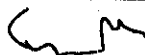
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES.	SHAYNE Holmes	1211 MAIN ST STE 1	SALMON	ID	83467

5. Organized Under the Laws of:

IDAHO
C 164103

6.

Signature



Date

10-14-08

Name (Typed or Printed)

SHAYNE Holmes

Title

PRES

Issued 10/01/2008

Do Not Tape or Staple

200812004058