

No. C 99357	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct. If Not Correct MEDICAL SERVICE LIFE AGENCY, PHILLIP M. BARBER ESQ 877 N MAIN		PHILLIP M. BARBER ESQ 877 N MAIN BOISE ID 83701
	3. Organized Under the Laws of:		ID C 99357
* FIRST NOTICE * BOISE ID 83701			

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President:	Gerald A. Guenther	1220 Huron Road	Cleveland	Ohio	44115
Secretary:	Jerome W. Rogers	2060 East Ninth Street	Cleveland	Ohio	44115
Directors:	John Burry, Jr.	2060 East Ninth Street	Cleveland	Ohio	44115
	Gerald A. Guenther	1220 Huron Road	Cleveland	Ohio	44115
	Jerome W. Rogers	2060 East Ninth Street	Cleveland	Ohio	44115
	Kent W. Clapp	2060 East Ninth Street	Cleveland	Ohio	44115

5. NATURE OF BUSINESS LIFE INSURANCE AGENCY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.	
	Signature <u>Gerald A. Guenther</u> Name (Typed or Printed) <u>Gerald A. Guenther</u>	Date <u>8/9/96</u> Title <u>President</u>

ISSUED: 07-06-1996

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