

No. W 92370	Due no later than Apr 30, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CLEAR ADVANTAGE INSURANCE, LLC 1012 CEDAR AVE LEWISTON ID 83501		DUANE CEDRIC BOGAR 1012 CEDAR AVE LEWISTON ID 83501			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	LORI A BOGAR	1012 CEDAR AVE.	LEWISTON	ID	USA	83501
MEMBER	DUANE C BOGAR	1012 CEDAR AVE.	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID W 92370	6. Annual Report must be signed.* Signature: Lori Bogar Name (type or print): Lori Bogar		Date: 04/16/2014 Title: Member			
Processed 04/16/2014		* Electronically provided signatures are accepted as original signatures.				