rporation Annual Report Form

No. 861063 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECES		Idaho Corporation Annual Report Form Due No Later Than November 1, 1987 1. Mailing Address — Please Correct 061063 / THOMPSON INSURANCE AGENCY. INC. HILL IAM D. THOMPSON 280 H. BRIDGE STR — BOX 519 529		2. Registered Agent and Office MILLAM D. THOMPSON 288 WEST BRIDGE STRELT BLACKFOOT. 10 63221		
Names and Ad	87 JUL 21			PRIACHAGOT.	10	STATE OF
Names and Ad	Idresses of Officers		Street or D.O. Address		.	_
		<u>Name</u>	Street or P.O. Address	City	<u>State</u>	<u>Zip</u>
President: Secretary: Directors:	William D. 7 William D. 7 William D. 7 Dee Findlay	Thompson Thompson	P.O. Box 529 P.O. Box 529 P.O. Box 529 Route #1	Blackfoot Blackfoot Blackfoot Sterling	Idaho Idaho Idaho Idaho	83221 83221 83221 83279
Nature of Busin		Signature Name	y that this Annual Report has been examored and complete. William D. Thompson		the best of my k	87

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