

No.

C 69192

Annual Report Form

Due No Later Than November 30, 1997

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

DAVID LEONARDSON INSURANCE A
DAVID P. LEONARDSON
~~MAIN STREET~~
190 W MAIN ST
DUBOIS ID 83423

2. Registered Agent and Office NOT A P.O. BOX

DAVID P. LEONARDSON
MAIN STREET

DUBOIS

ID 83423

3. Organized Under the Laws of:

ID

C 69192

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

Office heldNameStreet or P.O. AddressCityStateZip

President

David LEONARDSON P.O. Box 251

DUBOIS

Id

83423

Vice-President

TARRI LEONARDSON

" "

" "

" "

5.

6.

Signature

Name (Typed or Printed)

Date

Title

David P. Leonardson

DAVID P. LEONARDSON

7-11-97

President

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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