

No. **C 121786**

**Due no later than December 31, 2003  
Annual Report Form**

2. Registered Agent and Office **NO PO BOX**

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

1. Mailing Address - Correct in this box if applicable

PENSION ONE SOURCE, INC.  
PO BOX 50577  
IDAHO FALLS, ID 83405 0577

JOHN G SIMMONS  
796 MEMORIAL DR

IDAHO FALLS, ID 83402

3. New Registered Agent Signature

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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>
President	John Simmons	796 Memorial Dr	Idaho Falls	Idaho	83402

5. Organized Under the Laws of:

IDAHO  
C 121786

6. Signature

*John Simmons*  
John SIMMONS

Date

10/9/03

Title

President

Name (typed or printed)

**Do Not Tape or Staple**

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