No. **C 59380**	**Due no later than Sep 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.** HOMESTEAD INSURANCE, INC. PAUL M KNISS 258 NO WATER AVE STE 1 IDAHO FALLS ID 83402-4096	PAUL M KNISS 258 NO WATER AVE STE 1 IDAHO FALLS ID 83402-4096 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	GREG J CHAPIN	258 N WATER AVE STE 1	IDAHO FALLS	ID	USA	83402
PRESIDENT	PAUL M KNISS	258 N WATER AVE. STE 1	IDAHO FALLS	ID	USA	83402

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 59380**	Signature: Paul M Kniss	Date: 09/16/2014
	Name (type or print): Paul M Kniss	Title: President

Processed 09/16/2014

* Electronically provided signatures are accepted as original signatures.