No. <b>C 203319</b>	Due no later than Sep 30, 2015	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	TRINA WHITAKER 739 STATE ST WEISER ID 83672  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  WHITAKER INSURANCE AGENCY, INC.  TRINA WHITAKER  739 STATE ST  WEISER ID 83672				
NO FILING FEE IF RECEIVED BY DUE DATE					
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
PRESIDENT TRINA WH	TAKER 739 STATE STREET	WEISER	ID	USA	83672
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: TRINA WHITAKER	Date: 07/20/2015			
C 203319	Name (type or print): TRINA WHITAKER	Title: PRESIDENT			
Processed 07/20/2015	* Electronically provided signatures are accepted as original signatures.				