

No. C 138709		Due no later than Apr 30, 2010		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		Annual Report Form		LARRY L CRAIG 1607 DAVIS AVE MCCALL ID 83638			
		1. Mailing Address: Correct in this box if needed. LARRY L. CRAIG INSURANCE AGENCY, INC. LARRY L CRAIG PO BOX 1649 MCCALL ID 83638		3. <u>New</u> 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	
PRESIDENT	LARRY L CRAIG	P O BOX 1649	MCCALL	ID	USA	83638	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 138709		Signature: Larry L Craig			Date: 03/09/2010		
		Name (type or print): Larry L Craig			Title: President		
Processed 03/09/2010		* Electronically provided signatures are accepted as original signatures.					