

No. C 149119		Due no later than May 31, 2009		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 1. Mailing Address: Correct in this box if needed. JON D SEARLE INSURANCE AGENCY, INC. JON SEARLE 1711 OVERLAND AVE BURLEY ID 83318		JON SEARLE 1711 OVERLAND AVE BURLEY ID 83318	
				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	JON SEARLE	42 E 220 S	BURLEY	ID	USA 83318
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
ID C 149119		Signature: Jon Searle Name (type or print): Jon Searle		Date: 03/16/2009 Title: President	
Processed 03/16/2009		* Electronically provided signatures are accepted as original signatures.			