

No. C 170074		Due no later than Nov 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 1. Mailing Address: Correct in this box if needed. CAN-ADA FAMILY INSURANCE INC LARRY R CRAWFORD 2377 W VALLI HI RD EAGLE ID 83616-2400		EVAN JIMMERSON 11490 W CREEKRAPIDS STAR ID 83669-2400			
				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 R CRAWFORD	2377 W VALLI HI RD	EAGLE	ID	USA	83616-2400	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 170074		Signature: Larry R Crawford				Date: 12/11/2010	
		Name (type or print): Larry R Crawford				Title: Pres	
Processed 12/11/2010		* Electronically provided signatures are accepted as original signatures.					