INSTRUCTIONS ON REVERSE SIDE ISSUED: 10-04-1990

No. 065458

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

** FINAL NOTICE **
NO FEE REQUIRED

Idaho Corporation Annual Report Form

Due No Later Than November 1,

1. Mailing Address — *Please Correct*

MATHIE INSURANCE AGENCY, IN
F. LEE MATHIE
BOX 339

BLACKFOOT ID 83221

2. Registered Agent and Office

F. LEE MATHIE
54 NORTH MAPLE

BLACKFOOT ID 83221

3. Incorporated Under The Laws of ID

NO: 065458

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	F. Lee Mathie	440 W. 350 N.	Blackfoot	ID	83221
Secretary:	Mary E. Mathie	440 W. 350 N.	Blackfoot	ID	83221
Directors:	F. Lee Mathie	440 W. 350 N.	Blackfoot	ID	83221
	Mary E. Mathie	440 W. 350 N.	Blackfoot	ID	83221
	Vincent D. Mathie	440 W. 350 N.	Blackfoot	ID	83221

5. Nature of Business

Insurance

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature F. Lee Mathie

Name (Typed or Printed) F. Lee Mathie

Date 10-15-90

Title President