INSTRUCTIONS ON REVERSE SIDE

No. 031233

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1987

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

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1. Mailing Address — *Please Correct* 031233

JOHN M. BARKER AGENCY, INC.
BARKER-OBENCHAIN INSURANC
P. O. BOX 549
BUHL IDAHO
83316

2. Registered Agent and Office

JAMES L. WELCH
123 SOUTH BROADWAY
BUHL, IDAHO
83316

3. Incorporated Under The Laws of

STATE OF IDAHO OCT 27 1987

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	JAMES L. WELCH	P O BOX 549	BUHL	ID	83316
Secretary:	TIM OBENCHAIN	P O BOX 269	TWIN FALLS	ID	83303
Directors: V Pres.	DAVID WHEAT	P O BOX 269	TWIN FALLS	ID	83303

5. Nature of Business

BARKER-OBENCHAIN 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 James L. Welch Date 10/22/87

Name (Typed or Printed) JAMES L. Welch Title Pres.

3 DECLARED 2:50 PM