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| No. C105697 | Annual Report Form 1986 Due No Later Than November 30, | 2. Registered Agent and Office NOT A P.O. BOX |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED | 1. Mailing Address - Please Correct, If Not Correct CASCADE SURETY AND BONDING, 19009 33RD AVE W STE 310 LYNNWOOD WA 98035 2720 | C T CORPORATION SYSTEM 300 NORTH 6TH STREET BOISE ID 83701 3. Organized Under the Laws of: WA C105697 |
| * FIRST NOTICE * | | |

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

| Office held | Name | Street or P.O. Address | City | State | Zip |
|---------------------------|-----------------|------------------------|----------|-------|-------|
| PRESIDENT } DIRECTOR } | GORDON WIGGENS | 19009 33RD AVE W #310 | LYNNWOOD | WA | 98037 |
| SECRETARY } DIRECTOR } | JERILYN WIGGENS | ✓ | ✓ | ✓ | ✓ |

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| 5. NATURE OF BUSINESS INSURANCE, BONDS & RELATED PRODUCTS | 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 <u>X Gordon Wiggins</u> Date <u>8-20-96</u> Name (Type or Printed) <u>GORDON WIGGENS</u> Title <u>PRESIDENT</u> |
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ISSUED: 07-06-1996

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