

No. C 175740

Due no later than November 30, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

SUMMER M JACKMAN INSURANCE AGENCY,
SUMMER M JACKMAN
1023 YELLOWSTONE AVE STE F
POCATELLO, ID 83201SUMMER M JACKMAN
1023 YELLOWSTONE AVE STE F
POCATELLO, ID 83201NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4.

Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
president	Summer M Jackman	1023 yellowstone Ave Ste F	Pocatello	ID	83201

5. Organized Under the Laws of:

IDAHO
C 175740

6.

Signature

Summer M Jackman

Date

Sep. 22, 2008

Name (Typed or Printed)

Summer M Jackman

Title

president

Issued 09/02/2008

Do Not Tape or Staple

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