

No. C 160101	Due no later than Apr 30, 2014 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. HARRISON INSURANCE & FINANCIALS, LTD. KATHLEEN M HARRISON 101 E BULLION #2A HAILEY ID 83333		KATHLEEN M HARRISON 101 E BULLION #2A HAILEY ID 83333			
			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
SECRETARY	JOHN S HARRISON	101 E. BULLION SUITE 2A	HAILEY	ID	USA	83333
PRESIDENT	KATHLEEN M HARRISON	101 E. BULLION SUITE 2A	HAILEY	ID	USA	83333
5. Organized Under the Laws of: ID C 160101	6. Annual Report must be signed.* Signature: Kathleen Harrison Name (type or print): Kathleen Harrison		Date: 02/12/2014 Title: President			
Processed 02/12/2014		* Electronically provided signatures are accepted as original signatures.				