

No. C 96970	Due no later than Dec 31, 2013 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. DAISS INSURANCE AGENCY, INC. DEBRA L CHRISTOPHERSEN PO BOX 703 BUHL ID 83316		DEBRA L CHRISTOPHERSEN 905 MAIN STREET BUHL ID 83316			
			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
PRESIDENT	DEBRA L CHRISTOPHERSEN	905 MAIN ST	BUHL	ID	USA	83316
SECRETARY	DEBRA L CHRISTOPHERSEN	905 MAIN ST	BUHL	ID	USA	83316
5. Organized Under the Laws of: ID C 96970	6. Annual Report must be signed.* Signature: Debra Christophersen Name (type or print): Debra Christophersen		Date: 10/17/2013 Title: Pres			
Processed 10/17/2013		* Electronically provided signatures are accepted as original signatures.				