| No. C 130270 | | Due no later than Aug 31, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. WILLIAM SHAFFER INSURANCE AGENCY, INC. WILLIAM C SHAFFER 3079 N HEARTH AVE MERIDIAN ID 83646 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------------------------|--|---|--------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | 1216 TALON CALDWELL I | WILLIAM C SHAFFER 1216 TALON CT CALDWELL ID 83607 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine | | USA | of Descident Corretow, and Directors Transcript | uror (entional) | (optional) | | | |
| Office Held | Name | iess Audi esses (| Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT SECRETARY | WILLIAM C JEANNETTE | | 3079 N. HEARTH AVE 3079 N. HEARTH AVE | MERIDIAN MERIDIAN | ID ID | USA USA | 83646 83646 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 130270 | | Signature: \ | William C Shaffer | | Date: 09/15/2010 | | | |
| | | Name (type | or print): William C Shaffer | | Title: President | | | |
| Processed 09/15/2010 | | * Electronically | provided signatures are accepted as original | l signatures. | | | | |