

OF STATE
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF
RECEIVED BY DUE DATE

Due no later than May 31, 2004
Annual Report Form

1. Mailing Address - Correct in this box, if applicable
KUESPERT INSURANCE AGENCY, INC.
PAUL D KUESPERT
PO BOX 900
PARMA, ID 83660

2. Registered Agent and Office **NO PO**
JANELLE D KUESPERT
208 GROVE
PARMA, ID 83660

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	Paul D. Kuespert	PO Box 900	Parma	ID	83660
Sec/Treas	Janelle D. Kuespert	PO Box 900	Parma	ID	83660

5. Organized Under the Laws of:

IDAHO
C 106422

Issued 03/02/2004

6. Signature

Name (Typed or Printed)

Janelle D. Kuespert
Janelle D. Kuespert

Date

6-4-04

Title

Sec/Treas

Do Not Tape or Staple