

No. C 164103

Due no later than: December 31, 2007
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

HOLMES INSURANCE AGENCY, INC.
1211 MAIN ST STE 1
SALMON, ID 83467

SHAYNE A HOLMES
1211 MAIN ST STE 1
SALMON, ID 83467

NO FILING FEE IF

RECEIVED BY DUE DATE

3. 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>
Pres.	SHAYNE HOLMES	1211 MAIN ST STE 1	SALMON	ID	83467
Secy	ROBIN HOLMES	"	"	"	"

5. Organized Under the Laws of:
IDAHO
C 164103

6.

Signature



Date

10-25-07

Name

(Typed or
Printed)

SHAYNE HOLMES

Title

Pres.

Issued 10/01/2007

Do Not Tape or Staple

200712004946