No. C 118443	Due no later than Feb 28, 2002	2. Registered Agent and Office NO PO BOX
	Annual Report Form	S KORY PORTER
Return to:	Mailing Address - Correct in this box, if applicable	3807 E 97 N
SECRETARY OF STATE 700 WEST JEFFERSON	PORTER INSURANCE INC.	
PO BOX 83720		IDAHO FALLS, ID 83401
BOISE, ID 83720-0080	3807 E 97 N	The state of Accest Computers
<i>,</i>		3. New Registered Agent Signature
NO FILING FEE IF	IDAHO FALLS, ID 83401	
RECEIVED BY DUE DATE	17 11 1 0	tany and Directors
4. Corporations: Enter N	Names and Business Addresses of President, Secre	tary and Directors.
	Street or B.O. Address	ity <u>State</u>
Office held Name	D . 30 - 5 03 W Td	cho Falls Id. 83401
President S. K	and Leston 2801 P. Alive Tax	
President S. K	ing Portor 3807 E. 97 N. Ide	•
President S. K	and Leaster 2801 G . L. M. To.	
President S. K	and Leater 2801 G . de et. To	
President S. K	and Leater 2801 G . de et. To	
President S. K	and Leater 2801 G . de et. To	
President S. K	and Leater 2801 G "de in. To	
President S. K	and Leater 2801 G "de in. To	
President S. K	and Leater 2801 & "de it. To	
President S. K	and Leater 2801 & "de it. To	
President S. K 5. Organized Under the Laws o	of: 6. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5. Organized Under the Laws o	of: 6. Signature 1. Comp. Fol	Date 1-2-02
5. Organized Under the Laws o	of: 6. Signature 1. Comp. Fol	Date 1-2-02
5. Organized Under the Laws o	of: 6. Signature	Date 1-2-02
5. Organized Under the Laws o	of: Signature 1. Kony Porting of Stanley Name Printed)	Date 1-2-02