

No. C 127766

Due no later than Mar 31, 2001
Annual Report Form

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

TODD LESLIE INSURANCE SERVICES, INC
TODD LESLIE
54 N MAPLE STE A
BLACKFOOT, ID 83221

2. Registered Agent and Office **NO PO BOX**

TODD LESLIE
54 N MAPLE STE A
BLACKFOOT, ID 83221

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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>
President	TODD Leslie	54 N. Maple St A	Blackfoot	ID	83221
Secretary	Wendy Leslie	54 N. Maple St A	Blackfoot	ID	83221

5. Organized Under the Laws of:

IDAHO
C 127766

6.

Signature

Name (Type or Printed)

Todd Leslie
TODD Leslie

Date

Title:

1-25-01

~~XXXX~~

President

Issued 01/02/2001

Do Not Tape or Staple