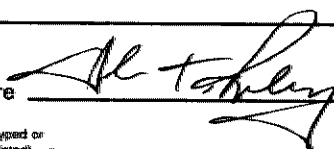


NO. <b>C117560</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1997</b>	2. Registered Agent and Office <b>NOT A P.O. BOX</b> <b>C T CORPORATION SYSTEM</b> <b>300 NORTH 6TH STREET</b>  <b>BOISE</b> <b>ID 83701</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>COMBINED BENEFITS INSURANCE</b>  <b>PO BOX 3537</b>  <b>MISSOULA</b> <b>MT 59806</b>	3. Organized Under the Laws of:  <b>MT</b> <b>C117560</b>
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
President	John T. Riley	P.O. Box 3537
Vice Pres. - Claims	Randy Hack	"
Treasurer	Ron King	P.O. Box 4309
<del>Genl</del> Secretary	Bill Jensen	P.O. Box 4309
Asst. Sec/Treasurer	Barbara brieff.th	P.O. Box 3537
<u>City</u>	<u>State</u>	<u>Zip</u>
Missoula	MT	59806
"	"	"
Helena	MT	59604
Helena	MT	59604
Missoula	MT	59806
5.		6.
		Signature 
		Date <b>2/12/97</b>
		Name (Typed or Printed) _____
		Title _____

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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