

No. C 86863		Due no later than Jun 30, 2018		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		MICHAEL S MAY 611 S ORCHARD ST BOISE ID 83705-1243	
		1. Mailing Address: Correct in this box if needed. MICHAEL S. MAY INSURANCE AGENCY INCORPORATED MICHAEL S MAY 611 S ORCHARD ST BOISE ID 83705-1243		3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
PRESIDENT	MICHAEL S MAY	6950 ASHLAND DR	BOISE	ID	83709-1914
VICE PRESIDENT	KEVIN A CARSON	5656 W PEACHTREE ST	BOISE	ID	83703-3122
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
ID C 86863		Signature: Michael S May		Date: 04/24/2018	
		Name (type or print): Michael S May		Title: President	
Processed 04/24/2018		* Electronically provided signatures are accepted as original signatures.			