

No. C106010

Annual Report Form

Due No Later Than November 30,

1996

2. Registered Agent and Office NOT A P.O. BOX

Return to:

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

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

MOUNTAIN VALLEY INSURANCE, I
JASON C NIELSON
361 S 300 EWINSTON V BEARD
683 N CAPITAL

IDAHO FALLS ID 83405

3. Organized Under the Laws of:

ID

C106010

★ FIRST NOTICE ★

REXBURG

ID 83440

4. Corporations: Enter Names and Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)Office heldNameStreet or P.O. AddressCityStateZip

President

Jason C. Nielson 361 S. 300 E

Rexburg

Idaho

83440

Secretary

Winston V. Beard 2105 Coronado

Idaho Falls

Idaho

83404

5.

NATURE OF BUSINESS

INSURANCE AGENCY

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Jason Nielson

Date

7-19-96

Name

(Typed or
Printed)

Jason Nielson

Title

President

ISSUED: 07-06-1996

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