

No. C106637

Annual Report Form 1999
Due No Later Than November 30,

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

* **FIRST NOTICE** *

1. Mailing Address - Please Correct, If Not Correct

MARK WILPONEN INSURANCE AGENT
MARK W WILPONEN
622 BRYDEN AVE

LEWISTON ID 83501

MARK W WILPONEN
622 BRYDEN AVE

LEWISTON ID 83501

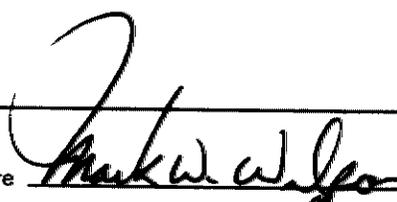
3. Organized Under the Laws of:

ID C106637

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of **Managers** or **Members** (check one)

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Mark W Wilponen	622 Bryden Ave.	Lewiston	ID	83501
Secretary	Shirley Squires	622 Bryden Ave.	Lewiston	ID	83501

5. Signature of New Registered Agent

6. Signature  Date 7-20-99
Name (Typed or Printed) MARK W. WILPONEN Title PRES.

ISSUED: 07-03-1999

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