

No. C 178118	Due no later than Apr 30, 2013 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. GRAYFIELD INSURANCE AGENCY, INC. TRACY L WARFIELD PO BOX 900 PARMA ID 83660 USA	TRACY L WARFIELD 208 E GROVE PARMA ID 83660	
		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	TRACY L WARFIELD	3103 RAY AVENUE	CALDWELL ID USA 83605
5. Organized Under the Laws of: ID C 178118	6. Annual Report must be signed.* Signature: Tracy L Warfield Name (type or print): Tracy L Warfield		Date: 04/30/2013 Title: President
Processed 04/30/2013		* Electronically provided signatures are accepted as original signatures.	