No. c 73255	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	MARK ROBY 102 S 17TH STE 200
	MARK ROBY AGENCY, INC. MARK ROBY P. D. BOX 6326	301SE ID 33702
* FIRST WOTTER *	301SF TD 33737	3. Organized Under the Laws of:
4. Corporations: Enter Names and	Addresses of President, Secretary and Directors er Names and Addresses of Managers or Members	
Office held Name PRES, T. MARK	ROBY (Bus) 102 S 174, Ste 200	City State Zip BOISE ID 83702
V. PRES/SEC: LORRI	ROBY (HOME) 2042 N. TRAILUIEW	PL, BOISE ID 83702
5. NATURE OF BUSINESS	6. I certify that this Annual Report has been en knowledge true correct and complete.  Signature	examined by me and is to the best of my  Date 7-29-96
INSURANCE & SEC	JRITIES SMETTE Styped or LORRI ROB	Y Title V. Pres/Sec.
ISSUED: 37-06-19	<b>) &gt; 5</b>	21977