

No. C 131815		Due no later than Dec 31, 2016		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 1. Mailing Address: Correct in this box if needed. DAVIES INSURANCE SERVICES, INC. MICHAEL A DAVIES 450 W STATE ST STE 125 EAGLE ID 83616		MICHAEL A DAVIES 450 W STATE ST STE 125 EAGLE ID 83616			
				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	
SECRETARY	ANGELA D DAVIES	450 W STATE ST, STE 125	EAGLE	ID	USA	83616	
PRESIDENT	MICHAEL A DAVIES	450 W STATE ST, STE. 125	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 131815		Signature: Angela Davies				Date: 10/26/2016	
		Name (type or print): Angela Davies				Title: Secretary	
Processed 10/26/2016		* Electronically provided signatures are accepted as original signatures.					