No. C 196487		Due no later than Nov 30, 2016		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. WOOD RIVER INSURANCE, INC 410 N MAIN ST HAILEY ID 83333		78 SW 5TH MERIDIAN	KENNETH L MELLEA 78 SW 5TH AVE STE 1 MERIDIAN ID 83642 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busin		ass Addrassas of Pr	ocident Secretary and Directors Tree	acurer (ontional)				
Office Held	Name	c55 / (ddi c55c5 01 1 1	Street or PO Address	City	State	Country	Postal Code	
SECRETARY DIRECTOR PRESIDENT	MARGARET BALCOS MARK S BALCOS HAILEE BLOMQUIST-MINTZ		410 N MAIN ST 410 N MAIN ST 410 N MAIN ST	HAILEY HAILEY HAILEY	ID ID ID	USA USA USA	83333 83333 83333	
5. Organized Under the Laws of: ID C 196487		6. Annual Report must be signed.* Signature: Sandy Kelly Name (type or print): Sandy Kelly			Date: 10/21/2016 Title: cpa			
Processed 10/21/2016 * Electronically provided signatures are accepted as original signatures.								