

No. W 17488

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

COLE INSURANCE, L.L.C.
612 MAIN ST
SALMON, ID 83467BRUCE A COLE
612 MAIN ST
SALMON, ID 83467NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT -	Bruce Cole	612 MAIN	SALMON	ID.	83467
VICE-PRESIDENT -	Bruce Cole	612 MAIN	SALMON	ID.	83467
SECRETARY -	Melissa Cole	612 MAIN	SALMON	ID.	83467

5. Organized Under the Laws of:
IDAHO
W 17488

6.

Signature



Date

10/12/2007

Name

(Typed or
Printed)

BRUCE A. COLE

Title

PRESIDENT

Issued 10/01/2007

Do Not Tape or Staple

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