

89685

INSTRUCTIONS ON REVERSE SIDE PLEASE TYPE OR PRINT

No.	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1992	BOB SVANCARA 2201 ADA STREET
	1. Mailing Address — Please Correct, If Not Correct  JAMES INSURANCE, INC. BOB SVANCARA 840 E ALAMEDA STE B  POCATELLO ID 83201 0000	POCATELLO ID 83201  3. Incorporated Under The Laws of ID NO: 89685

## 4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	BOB SVANCARA	840 E. ALAMEDA SUITE B	POCATELLO	ID	83201
Secretary:					
Directors:	PENNY SVANCARA				

✓ 12

SAME AS LAST YEAR

## 5. Nature of Business

INSURANCE

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Printed)

Date

Title

 BOB SVANCARA  
 BOB SVANCARA

 7-8-92  
 Pres