

No. <b>C 179515</b>		<b>Due no later than Jul 31, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  GARY LOUIE INSURANCE AGENCY, INC. GARY L LOUIE 1900 NW BLVD SUITE 110 CDA ID 83814		GARY LOUIE 1900 NW BLVD SUITE 110 CDA ID 83814			
				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	
PRESIDENT	GARY L LOUIE	11348 N TRAFALGAR ST	HAYDEN LAKE	ID	USA	83835-8383	
5. Organized Under the Laws of:  <b>ID C 179515</b>		6. Annual Report must be signed.* Signature: Gary Louie Name (type or print): Gary Louie Date: 06/05/2012 Title: President					
Processed 06/05/2012		* Electronically provided signatures are accepted as original signatures.					