

No. W 36086

Due no later than January 31, 2009  
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  
BALLARD INSURANCE GROUP, LLC  
RUDY BALLARD  
147 N 2ND EAST STE 1  
REXBURG, ID 83440

GREGORY P MEACHAM  
2000 JENNIE LEE DR  
IDAHO FALLS, ID 83404  
New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	RUDY BALLARD	147 N 2ND E Suite 1	Rexburg	ID	83440
MEMBER	Kelly BALLARD	147 N 2ND E Suite 1	Rexburg	ID	83440
MEMBER					

5. Organized Under the Laws of:  
IDAHO  
W 36086

6. Signature Rudy Ballard Date 11-19-08  
Name (Typed or Printed) RUDY BALLARD Title MANAGER