

No. C 69192

Due no later than March 31, 2008

## 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

DAVID LEONARDSON INSURANCE AGENCY,  
DAVID P LEONARDSON  
1109 SUMMERS DR  
REXBURG, ID 83440DAVID P LEONARDSON  
1109 SUMMERS DR  
REXBURG, ID 83440NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	David P. Leonardson	234 S. Center	Dubois	ID	83423

5. Organized Under the Laws of:

IDAHO  
C 69192

6.

Signature

Alaina R. Fanning

Date

1/16/08

Name (Typed or Printed)

Alaina R. Fanning

Title

Office Manager

Issued 01/02/2008

Do Not Tape or Staple

200803000661