

No. <b>C 193811</b>		<b>Due no later than Feb 28, 2014</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  BRIAN STRONG INSURANCE AGENCY INC BRIAN STRONG 593 FOXGLOVE RD BONNERS FERRY ID 83805		BRIAN STRONG 593 FOXGLOVE RD BONNERS FERRY ID 83805			
						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	BRIAN STRONG	593 FOXGLOVE RD	BONNERS FERRY	ID	USA	83805	
DIRECTOR	BRIAN STRONG	593 FOXGLOVE RD	BONNERS FERRY	ID	USA	83805	
SECRETARY	BRIAN STRONG	593 FOXGLOVE RD	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of:  <b>ID</b> <b>C 193811</b>		6. Annual Report must be signed.*  Signature: Brian Strong Name (type or print): Brian Strong					
		Date: 01/13/2014 Title: President					
Processed 01/13/2014		* Electronically provided signatures are accepted as original signatures.					