

No. C 129419	Due no later than Jun 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Check in this box, if applicable PEOPLE'S INSURANCE INCORPORATED DAVE THOMAS 719 DUNDEE DR POST FALLS, ID 83854		DAVE THOMAS 200 INDIANA AVE STE 207 1250 DUNNWOOD DR. SUITE 301 COEUR D'ALENE, ID 83814 301
NO 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	DAVE THOMAS	719 DUNDEE DR.	POST FALLS ID 83854
SECRETARY	JOE FOREYCE	315. WILLOW DR.	LIBERTY LAKE WA 99019
5. Organized Under the Laws of:		6. Signature _____ Date 3/3/03	
IDAHO C 129419		Name (Typed or Printed) DAVE THOMAS Title PRESIDENT	