

| No. C 82721 | Annual Report Form 1999 <i>Due No Later Than November 30,</i> | | 2. Registered Agent and Office NOT A P.O. BOX | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|--------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|-----------|------------------|----------------------|-------------|----|-------|-----------|-----------------|----------------------|-------------|----|-------|-----------|------------------|--|--|--|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * | 1. Mailing Address - Please Correct, If Not Correct ARCHIBALD INSURANCE AGENCY, 2105 CORONADO IDAHO FALLS ID 83404 7495 | | WINSTON V BEARD 2105 CORONADO IDAHO FALLS ID 83404 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3. Organized Under the Laws of: | | ID C 82721 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Winston V. Beard</td> <td>2105 Coronado Street</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Secretary</td> <td>Jarin O. Hammer</td> <td>2105 Coronado Street</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Director:</td> <td>Winston V. Beard</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President | Winston V. Beard | 2105 Coronado Street | Idaho Falls | ID | 83404 | Secretary | Jarin O. Hammer | 2105 Coronado Street | Idaho Falls | ID | 83404 | Director: | Winston V. Beard | | | | |
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | | |
| President | Winston V. Beard | 2105 Coronado Street | Idaho Falls | ID | 83404 | | | | | | | | | | | | | | | | | | | | | | | |
| Secretary | Jarin O. Hammer | 2105 Coronado Street | Idaho Falls | ID | 83404 | | | | | | | | | | | | | | | | | | | | | | | |
| Director: | Winston V. Beard | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Signature of New Registered Agent | | 6. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Signature <u>Winston V. Beard</u> Date <u>7/19/99</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Name <small>(Typed or Printed)</small> <u>Winston V. Beard</u> Title <u>President</u> | | | | | | | | | | | | | | | | | | | | | | | | | | |

ISSUED: 07-03-1999

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