

No. 031749	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE JUL 20 AM 9 55	Due No Later Than November 1, 1988		BARRY L. HOOPES 1246 YELLOWSTONE, #B-4 POCA TELLO, IDAHO 83201																									
	1. Mailing Address — Please Correct 031749																											
	INSURANCE AND FINANCIAL PLANNING BARRY L. HOOPES P. O. BOX 4932 4610 POCA TELLO, IDAHO 83205		3. Incorporated Under The Laws of STATE OF IDAHO																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>BARRY L. HOOPES</td> <td>2256 DOUGLAS</td> <td>POCA TELLO</td> <td>ID.</td> <td>83201</td> </tr> <tr> <td>Secretary:</td> <td>JUDY K. HOOPES</td> <td>2256 DOUGLAS</td> <td>POCA TELLO</td> <td>ID.</td> <td>83201</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	BARRY L. HOOPES	2256 DOUGLAS	POCA TELLO	ID.	83201	Secretary:	JUDY K. HOOPES	2256 DOUGLAS	POCA TELLO	ID.	83201	Directors:					
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Directors:																												
5. Nature of Business INSURANCE		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td> (Typed or Printed) BARRY L. HOOPES </td> <td>7-18-88</td> </tr> <tr> <td>Title</td> <td></td> </tr> <tr> <td>PRES.</td> <td></td> </tr> </table>			Signature	Date	(Typed or Printed) BARRY L. HOOPES	7-18-88	Title		PRES.																	
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 JUL 29 1988