

No. C 69192	Due no later than March 31, 2004 Annual Report Form	2. Registered Agent and Office NO PO BOX DAVID P LEONARDSON MAIN STREET DUBOIS, ID 83423																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address <small>Correct in this box, if applicable</small> DAVID LEONARDSON INSURANCE AGENCY, DAVID P LEONARDSON PO BOX 267 DUBOIS, ID 83423	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <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>DAVID P Leonardson</td> <td>PO Box 267</td> <td>Dubois</td> <td>ID</td> <td>83423</td> </tr> <tr> <td>Secretary</td> <td>TARRI L Leonardson</td> <td>PO Box 267</td> <td>Dubois</td> <td>ID</td> <td>83423</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	DAVID P Leonardson	PO Box 267	Dubois	ID	83423	Secretary	TARRI L Leonardson	PO Box 267	Dubois	ID	83423
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>															
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Secretary	TARRI L Leonardson	PO Box 267	Dubois	ID	83423															
5. Organized Under the Laws of: IDAHO C 69192	6. Signature <u>Sue Furniss</u> Date _____ Name <small>(Typed or Printed)</small> <u>OFF SUE FURNISS</u> Title <u>Office Manager</u>																			