




ISSUED: 07-05-1994

No. 78207	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994	2. Registered Agent and Office LYNN D. ARCHIBALD 117 W. MAIN, BOX 96 REXBURG ID 83440																								
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 ★ FIRST NOTICE ★ NO FEE REQUIRED	1. Mailing Address — ARCHIBALD INSURANCE CENTER, INC LYNN ARCHIBALD 117 WEST MAIN, BOX 96 REXBURG ID 83440	3. Incorporated Under The Laws of ID NO: 78207																								
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>LYNN D. ARCHIBALD</td> <td>73 N. 300 EAST</td> <td>REXBURG</td> <td>ID.</td> <td>83440</td> </tr> <tr> <td>Secretary:</td> <td>PATRICIA ARCHIBALD</td> <td>1690 S. 1000 WEST</td> <td>REXBURG</td> <td>ID.</td> <td>83440</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:	LYNN D. ARCHIBALD	73 N. 300 EAST	REXBURG	ID.	83440	Secretary:	PATRICIA ARCHIBALD	1690 S. 1000 WEST	REXBURG	ID.	83440	Directors:					
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Directors:																										
5. Nature of Business INSURANCE - INACTIVE	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>  LYNN D. ARCHIBALD </td> <td>7-12-94</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>LYNN D. ARCHIBALD</td> <td>PRESIDENT</td> </tr> </table>		Signature	Date	 LYNN D. ARCHIBALD	7-12-94	Name (Typed or Printed)	Title	LYNN D. ARCHIBALD	PRESIDENT																
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