

No. C 24966		Due no later than Apr 30, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. KRUSE INSURANCE, INC. RONALD HOWELL RONALD B. HOWELL P. O. BOX 489 POCATELLO ID 83204-0489		RONALD B. HOWELL 755 NORTH MAIN, SUITE E POCATELLO ID 83204-0489			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	BRET A HOWELL	PO BOX 489	POCATELLO	ID	USA	83204-0489	
PRESIDENT	RONALD B HOWELL	PO BOX 489	POCATELLO	ID	USA	83204-0489	
5. Organized Under the Laws of: ID C 24966		6. Annual Report must be signed.* Signature: Bret Howell Name (type or print): Bret Howell Date: 02/27/2018 Title: Secretary					
Processed 02/27/2018		* Electronically provided signatures are accepted as original signatures.					