INSTRUCTIONS ON REVERSE SIDE

No. 106637

Idaho Corporation Annual Report Form

Due No Later Than November 30, 1995

Return To

Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address - Please Correct If Not Correct

MARK WILPONEN INSURANCE AGENCY,
MARK W WILPONEN
~~145 J THAIN RD~~ 622 BRYDEN AVE
LEWISTON ID 83501

2. Registered Agent and Office NOT A P.O. BOX

MARK W WILPONEN
~~145 J THAIN RD~~
622 BRYDEN AVE
LEWISTON ID 83501

3. Incorporated Under The Laws of

ID
NO: 106637

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	MARK W WILPONEN	622 BRYDEN AVE	LEWISTON,	ID	83501
Secretary:	SHIRLEY SQUIRES	2005 RILEY AVE	LEWISTON	ID	83501
Directors:	ANN L WILPONEN	622 BRYDEN AVE	LEWISTON,	ID	83501

5. Nature of Business

INSURANCE OFFICE

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Mark W. Wilponen Date 8-2-95

Name (Typed or Printed) MARK W WILPONEN Title PRES