

No. 076286	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 JUN 10 1988	Due No Later Than November 1, 1988		JAMES E. DICKINSON EAST 606 SELTICE WAY POST FALLS, IDAHO 83854																					
	1. Mailing Address — Please Correct 076286 JAMES E. DICKINSON INSURANCE, IN JAMES E. DICKINSON EAST 606 SELTICE WAY POST FALLS, IDAHO 83854																							
	4. Names and Addresses of Officers and Directors		3. Incorporated Under The Laws of STATE OF IDAHO																					
<table border="1"> <thead> <tr> <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: JAMES E. DICKINSON</td> <td>E. 2300 ROOKEY DR</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Secretary: CAROL A. DICKINSON</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: JAMES E. DICKINSON	E. 2300 ROOKEY DR	Post Falls	ID	83854	Secretary: CAROL A. DICKINSON					Directors:				
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President: JAMES E. DICKINSON	E. 2300 ROOKEY DR	Post Falls	ID	83854																				
Secretary: CAROL A. DICKINSON																								
Directors:																								
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																						
INSURANCE OFFICE		<table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Name (Typed or Printed) JAMES E. DICKINSON</td> <td>7-8-88</td> </tr> <tr> <td></td> <td>Title President</td> </tr> </table>			Signature	Date	Name (Typed or Printed) JAMES E. DICKINSON	7-8-88		Title President														
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