

No. 52582

**Idaho Corporation Annual Report Form**

Due No Later Than November 1, 1994

Return To

Secretary of State  
Room 203, Statehouse  
P.O. BOX 83720  
Boise, ID 83720-0080

\* FIRST NOTICE \*  
NO FEE REQUIRED

1. Mailing Address —

MCQUARY INSURANCE AGENCY OF IDA  
DON MCQUARY  
P. O. BOX ~~448~~ 448  
  
LEWISTON ID 83501

2. Registered Agent and Office

~~XXXXXXXXXX~~ Don McQuary  
~~XXXXXXXXXX~~ 1029 Main St.  
  
LEWISTON ID 83501

3. Incorporated Under The Laws

of ID  
NO: 52582

4. Names and Addresses of Officers and Directors

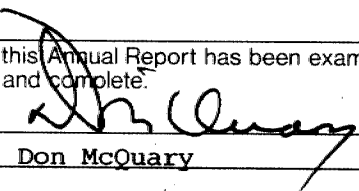
**MUST BE PRINTED OR TYPED**

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Don McQuary	1613 Ridgeway Drive	Clarkston	Wa.	99403
Secretary:	Phil Stonebraker	1224 3rd Street	Lewiston,	Id.	83501
Directors:					

5. Nature of Business

Insurance Agency

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

X Signature   
Name (Typed or Printed) Don McQuary

Date 8-11-94  
Title President