

No. C 88277	Due no later than Dec 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX GARY MICHAEL MILLER 6412 KOOTENAI BONNERS FERRY, ID 83805													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable KAYSER INSURANCE AGENCY, INC. GARY MICHAEL MILLER BOX 1538 BONNERS FERRY, ID 83805		3. <u>New</u> Registered Agent Signature													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Mike Miller</td> <td>6412 Kootenai PO BOX 1538</td> <td>Bonnors Ferry.</td> <td>ID</td> <td>83805</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Mike Miller	6412 Kootenai PO BOX 1538	Bonnors Ferry.	ID	83805
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Mike Miller	6412 Kootenai PO BOX 1538	Bonnors Ferry.	ID	83805											
5. Organized Under the Laws of: IDAHO C 88277	6. <table border="1"> <tr> <td>Signature</td> <td>Kathleen R. Hosterman</td> <td>Date</td> <td>12-11-01</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Kathleen R. Hosterman</td> <td>Title</td> <td>Accountant</td> </tr> </table>				Signature	Kathleen R. Hosterman	Date	12-11-01	Name (Typed or Printed)	Kathleen R. Hosterman	Title	Accountant				
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