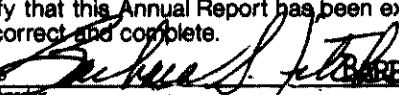


95142

<b>No.</b>  Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	<b>Idaho Corporation Annual Report Form</b> <b>Due No Later Than November 1, 1992</b> 1. Mailing Address - <i>Please Correct If Not Correct</i>  <b>FITCH INSURANCE AGENCIES, INC.</b> <b>BARBARA S FITCH</b> <b>PO BOX #547</b>  <b>PAYETTE</b> <b>ID 83661 0000</b>	2. Registered Agent and Office NOT A P.O. BOX  <b>BARBARA S FITCH</b> <b>815 CENTER AVE</b>  <b>PAYETTE</b> <b>ID 83661</b>  3. Incorporated Under The Laws of <b>ID</b>  <b>NO: 95142</b>																														
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <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:</td> <td>BARBARA S FITCH</td> <td>#1133 FIRST AVE S</td> <td>PAYETTE,</td> <td>ID</td> <td>83661</td> </tr> <tr> <td>Secretary:</td> <td>E ANN SCHIEMER</td> <td>#1176 LOCUST WAY</td> <td>ONTARIO,</td> <td>OR</td> <td>97914</td> </tr> <tr> <td>Directors:</td> <td>BARBARA S FITCH</td> <td>#1133 FIRST AVE S</td> <td>PAYETTE,</td> <td>ID</td> <td>83661</td> </tr> <tr> <td></td> <td>E ANN SCHIEMER</td> <td>#1176 LOCUST WAY</td> <td>ONTARIO,</td> <td>OR</td> <td>97914</td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	BARBARA S FITCH	#1133 FIRST AVE S	PAYETTE,	ID	83661	Secretary:	E ANN SCHIEMER	#1176 LOCUST WAY	ONTARIO,	OR	97914	Directors:	BARBARA S FITCH	#1133 FIRST AVE S	PAYETTE,	ID	83661		E ANN SCHIEMER	#1176 LOCUST WAY	ONTARIO,	OR	97914
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5. Nature of Business  <b>INSURANCE AGENCY</b>	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  <b>BARBARA S FITCH</b> Date <b>7-8-92</b> Name (Printed) <b>PAYETTE</b> Title <b>PRESIDENT</b>																															