No. <b>W</b> 9670	Due no later than September Annual Report Form	COF	2. Registered Agent and Office NO PO BOX  CORPORATION SERVICE COMPANY  1401 SHORELINE DR STE 2  BOISE, ID 83702	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, i SECURITY NATIONAL CONSUMER SERVI 323 FIFTH ST EUREKA, CA 95501	CES BOI		
NO FILING FEE IF	E		ew Registered Age	nt Signature
4. Limited Liability Com	panies: Enter Names and Addresses of M	anagers.		
Office held Name	Street or P.O. Address	City	State	<u>Zip</u>
	ITY NATIONAL 323 FIFTH STREET R MANAGER, LLC	EUREKA	CA	95501
	A A			
5. Organized Under the Laws ALASKA W 9670	of:  Signature  Name (Typind for Printled)  ALLAN GR	ÜSHKIN	Date 7/	TPO OFTIONAL ER MANAGER, LI MANAGER
\			20050	9001944