

No. C 50620

Due no later than December 31, 2004  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

ALPINE INSURANCE AGENCY, INC.  
PO BOX 1764  
IDAHO FALLS, ID 83403

CAROLYN A PETERSON  
290 TROY AVE  
IDAHO FALLS, ID 83402  
*STEPHEN FRANSON*  
*2980 BLUEBIRD LANE*  
*IDAHO FALLS, ID 83402*

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	CAROLYN PETERSON	1095 9th St.	IDAHO FALLS	ID	83402
Vice President	STEPHEN FRANSON	2980 BLUEBIRD LANE	IDAHO FALLS	ID	83402

5. Organized Under the Laws of:

IDAHO  
C 50620

6.

Signature

Date

Name (Typed or Printed)

Title

*Stephen Franson*  
*STEPHEN FRANSON*

*10/11/04*

*Vice Pres.*

Issued 10/01/2004

Do Not Tape or Staple

20041204028