

<b>No.</b> 83387	<b>Idaho Corporation Annual Report Form</b>	<b>2. Registered Agent and Office NOT A P.O. BOX</b>																								
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>	<b>Due No Later Than November 1, 1991</b>	H. ROBERT <del>STRADLEY</del> <sup>STRADLEY</sup> JR.																								
	<b>1 Mailing Address — Please Correct If Not Correct</b>	229 NORTH MAIN																								
	STRADLEY INSURANCE, INC. H. ROBERT STRADLEY 229 NORTH MAIN  KIMBERLY ID 83341	KIMBERLY ID 83341  <b>3. Incorporated Under The Laws</b> of ID  NO: 063387																								
<b>4. Names and Addresses of Officers and Directors</b> <table border="1"> <thead> <tr> <th></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>H. Robert Stradley Jr.</td> <td>P.O. Box S</td> <td>Kimberly</td> <td>Idaho</td> <td>83341</td> </tr> <tr> <td>Secretary:</td> <td>Helen M. Stradley</td> <td>P.O. Box S</td> <td>Kimberly</td> <td>Idaho</td> <td>83341</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	H. Robert Stradley Jr.	P.O. Box S	Kimberly	Idaho	83341	Secretary:	Helen M. Stradley	P.O. Box S	Kimberly	Idaho	83341	Directors:					
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<b>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.</b> Signature <u>H. R. Stradley Jr.</u> Date <u>7/8/91</u> Name (Typed or Printed) <u>H. Robert Stradley Jr.</u> Title <u>Pics</u>																									