

40. C111741	Annual Report Form 1990 Due No Later Than November 30,	2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ★ FIRST NOTICE ★	1. Mailing Address - Please Correct, If Not Correct NORTH STATE INSURANCE AND IN GARTH WEME 707 ALDER ST PO Box 61 506 SANDPOINT ID 83864	GARTH WEME 445 CEDAR ST 712 MAIN ST. SANDPOINT ID 83864
		3. Organized Under the Laws of: ID C111741

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	GARTH D. WEME	712 MAIN ST.	Sandpoint	Id.	83864
V P	CARA L. WEME	"	"	"	"

5. Signature of New Registered Agent

6.

Signature

Date

7.17.90

Name

(Typed or
Printed)

GARTH WEME

Title

Pres

ISSUED: 07-03-1998

30712

↓ DO NOT TAPE OR STAPLE ↓