

No. W 6238		Due no later than May 31, 2007		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. CASTLE LAKE INSURANCE, LLC WINSTON V BEARD 2105 CORONADO ST IDAHO FALLS ID 83401		WINSTON V BEARD 2105 CORONADO ST IDAHO FALLS ID 83401			
				3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	BRUCE L. WALDRAM	3399 S HOLMES AVE	IDAHO FALLS	ID		83404	
MEMBER	MATTHEW WALDRAM	3399 S HOLMES AVE.	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
IDAHO W 6238		Signature: Winston V. Beard				Date: 03/12/2007	
		Name (type or print): Winston V. Beard				Title: Agent	
Processed 03/12/2007		* Electronically provided signatures are accepted as original signatures.					