

INSTRUCTIONS ON REVERSE SIDE

No. 82923

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1993

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

★ FIRST NOTICE ★
NO FEE REQUIRED

1 Mailing Address - Please Check If Not Correct

POST INSURANCE SERVICES, INC.
WILLIAM F. POST
P. O. BOX 8447

BOISE

ID 83707

ISSUED: 07-01-1993
2. Registered Agent and Office NOT A P.O. BOX

WILLIAM F. POST
4477 EMERALD STE. A-200
P. O. BOX 8447
BOISE ID 83707

3. Incorporated Under The Laws

of ID
NO: 82923

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	Name	Street or P.O. Address	City	State	Zip
President:	William F. Post	P.O. Box 8447	Boise	ID	83707
Secretary:	Barbara L. Ballantyne	P.O. Box 8447	Boise	ID	83707
Directors:	William F. Post	P.O. Box 8447	Boise	ID	83707
	Saundra Post	P.O. Box 8447	Boise	ID	83707

5. Nature of Business

Insurance

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

Barbara L. Ballantyne

Date 7-8-93

Title Corp. Secretary