

No. <b>W 36963</b>	Due no later than <b>February 28, 2007</b> <b>Annual Report Form</b>			2. Registered Agent and Office <b>NO PO BOX</b>	
Return to: <b>SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080</b>	1. Mailing Address - Correct in this box, if applicable  <b>ASSOCIATED LOGGERS INSURANCE SERVIC JOHN R GRAHAM 3380 ELDER BOISE, ID 83705</b>			JOHN R GRAHAM 3380 ELDER BOISE, ID 83705	
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New Registered Agent Signature</u>	
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres + Manager	John Graham	P.O. Box 16410	Boise	ID	83715
5. Organized Under the Laws of: <b>IDAHO W 36963</b>		6. Signature <u>John Graham</u> Date <u>12-7-06</u> Name (Typed or Printed) <u>John Graham</u> Title <u>Pres</u>			

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Do Not Tape or Staple

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