1	NSIRU	CTIONS ON REVERSE SIDE .	TSSLEDA C	7-11-10	21	
No. 69632	Idaho Corporation Annual Report Form Due No Later Than November 1, Mulimi Address Program Corner I		2. Registered Agent and Office NOT A P.O. But DAVID S. TROY 625 BTH STREFT			
Return To Secretary of State						
Room 203, Statehouse Boise, ID 83720	TROY INSURA	NCE AGENCY, INC.	LEWISTON 10 83501 3. Incorporated Under The Laws of			
	PO BOX 796					
* FIRST NOTICE * NO FEE REQUIRED	LEWISTON	ID 83501	NO: 69632			
1. Names and Addresses of Officer	s and Directors	MUST BE PRINTED	OR TYPED			
	Name	Street or P.O. Address	City	State	Zlo	
President: DAVID S TROY Secretary: GISELA H TRO N/A		817 PROSPECT 2810 9TH AVENUE	LEWISTON LEWISTON	IDAHO IDAHO	83501 83501	
VICE PRESIDENT DAVID	S TROY SR	2810 9TH AVENUE	LEWISTON	IDAHO	83501	
		A / .	. 1			
5. Nature of Business	true corn	nat this Annual Report has been exe ect/and complete.	amined by me and is to t	he best of my	/ knowledge	
INSURANCE SALES & SE	RVICE Signature	7-14-93 Date				
	Name (7)ped	Name (Mond or DAVID STROY JR		Title PRESIDENT		

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