No. C 109138		Due no later than Jan 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. C.R. FARRER INSURANCE AGENCY, INC. C ROBERT FARRER 1241 WICKLOW CT		12	C ROBERT FARRER 1241 WICKLOW CT. IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		IDAHO FALLS ID 83404 3. New Registered Agent Signature:* ness Addresses of President, Secretary, and Directors. Treasurer (optional).						
	Name	c33 / (dd/ c33c3 0	Street or PO Address	City		State	Country	Postal Code
PRESIDENT (CARL R FARRER DARLENE J FARRER		1241 WICKLOW CT 1241 WICKLOW CT	IDA	HO FALLS HO FALLS	ID ID	USA USA	83404 83404
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Carl Farrer			Date: 11/15/2015			
C 109138		Name (type or print): Carl Farrer			Title: Pres.			
Processed 11/15/2015 * Electronically provided signatures are accepted as original signatures.								