

No. C 175230		Due no later than Sep 30, 2009 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. IDAHO HOMEOWNER EDUCATION & LOSS PREVENTION, INC SHELLEY B ANDRUS 228 E PLAZA ST STE B217 EAGLE ID 83616 USA		JASON ANDRUS 3103 WHITEPOST WAY EAGLE ID 83616			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	JASON M ANDRUS	228 E PLAZA ST. SUITE B217	EAGLE	ID	USA	83616-8361	
PRESIDENT	SHELLEY B ANDRUS	228 E PLAZA ST. SUITE B217	Eagle	ID	USA	83616-8361	
5. Organized Under the Laws of: ID C 175230		6. Annual Report must be signed.* Signature: Shelley B Andrus Name (type or print): Shelley B Andrus					
Processed 07/29/2009		Date: 07/29/2009 Title: President * Electronically provided signatures are accepted as original signatures.					