

Annual Report Form

1998

Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

** FINAL NOTICE **

1. Mailing Address - Please Correct, If Not Correct

BRUCE BEAN FAMILY INSURANCE,
BRUCE BEAN
872 S 400 W

BURLEY

ID 83318

2. Registered Agent and Office NOT A P.O. BOX

BRUCE BEAN
872 S 400 W

BURLEY

ID 83318

3. Organized Under the Laws of:

ID

W 2070

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

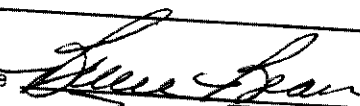
Zip

member Bruce Bean 872 S 400 W Burley ID 83318
member Barbara Bean

5. Signature of New Registered Agent

6.

Signature



Date

11-10-98

Name (Typed or Printed)

Bruce Bean

Title

Member

ISSUED: 10-03-1998

DO NOT TAPE OR STAPLE

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