No. <b>C 137362</b>		Due no later than Jan 31, 2015	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.  GINA L. WIXOM INSURANCE AGENCY, INC.  GINA L WIXOM PO BOX 1099	GINA L WIXOM 1495 PARKWAY DR STE D BLACKFOOT 83221  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		BLACKFOOT ID 83221 USA ess Addresses of President, Secretary, and Directors. Treasurer (				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY PRESIDENT	DONI N WIX	OM PO BOX 1099	BLACKFOOT BLACKFOOT	ID ID	USA USA	83221 83221
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Doni N Wixom	Date: 01/09/2015			
C 137362		Name (type or print): Doni N Wixom	Title: Secretary			
Processed 01/09/2015 * Electronically provided signatures are accepted as original signatures.						