

Annual Report Form
Due No Later Than November 30, 1998

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

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

TIM JENESON INSURANCE AGENCY
TIM JENESON
PO BOX 477

KETCHUM

ID 83340

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

TIM JENESON
540 FIRST AVE NORTH STE

KETCHUM ID 83340

3. Organized Under the Laws of:

ID

C109212

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

President	-	TIM JENESON	PO Box 1598	Hailey	ID	83333
Secretary	-	NANCY JENESON	PO Box 1598	Hailey	ID	83333
Director	-	TIM JENESON	PO Box 1598	Hailey	ID	83333
Director	-	NANCY JENESON	PO Box 1598	Hailey	ID	83333

5. Signature of New Registered Agent

6.

Signature

Date

10-11-98

Name
(Typed or
Printed)

TIM JENESON

Title

Pres.

ISSUED: 10-03-1998

DO NOT TAPE OR STAPLE

2148