

No. C 149119		Due no later than May 31, 2015 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. JON D SEARLE INSURANCE AGENCY, INC. JON SEARLE 1711 OVERLAND AVE BURLEY ID 83318		JON SEARLE 1711 OVERLAND AVE BURLEY 83318			
						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	
PRESIDENT	JON SEARLE	42 E 220 S	BURLEY	ID	USA	83318	
5. Organized Under the Laws of: ID C 149119		6. Annual Report must be signed.* Signature: Jon Searle Name (type or print): Jon Searle					
		Date: 03/23/2015 Title: President					
Processed 03/23/2015 * Electronically provided signatures are accepted as original signatures.							