No. C 191201		Due no later than May 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JON RICHE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PAYNEWEST INSURANCE, INC. MINDY CARVER PO BOX 4386 MISSOULA MT 59806-4386		960 BROADWAY AVE STE 100 BOISE 83706-0638 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer ((optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	PATRICK S	MCCUTCHEON	7 CLOVERVIEW DR	HELENA	MT	USA	59604
DIRECTOR	LARRY SIMKINS		101 INTERNATIONAL WAY	MISSOULA	MT	USA	59808
DIRECTOR	KYLE LINGSCHEIT		2929 PALMER, SUITE B	MISSOULA	MT	USA	59808
DIRECTOR			501 PATTEE CANYON DR.	MISSOULA	MT	USA	59803
TREASURER KEN LADDUSAW		2916 STILLWATER DR.	BILLINGS	MT	USA	59102	
PRESIDENT			2323 SECOND AVE. NORTH	BILLINGS	MT	USA	59101
SECRETARY	SARAH WALSH		1200 N MONTANA AVE	HELENA	MT	USA	59604-0638
DIRECTOR	JOHN SACIA		4311 E. LAKE SAMMAMISH PARKWAY	ISSAQUAH	WA	USA	98026-0638
DIRECTOR JERRY LUSK			6040 BOCA GRANDE CAUSEWAY RD. UNIT 12	BOCA GRANDE	FL	USA	33921-0638
		T					
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
MT C 191201		Signature: Mindy Carver		Date: 03/25/2015			
		Name (type or print): Mindy Carver		Title: General Counsel			
Processed 03/25/2015 * Electronically provided signatures are accepted as original signatures.							