

No. <b>C 178118</b>	<b>Due no later than Apr 30, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> WARFIELD INSURANCE AGENCY, INC TRACY L WARFIELD 524 CLEVELAND BLVD STE 150 CALDWELL ID 83605 USA		TRACY L WARFIELD 524 CLEVELAND BLVD STE 150 CALDWELL ID 83605			
			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	TRACY L WARFIELD	3103 RAY AVENUE	CALDWELL	ID	USA	83605
5. Organized Under the Laws of:  <b>ID C 178118</b>	6. Annual Report must be signed.* Signature: Tracy L. Warfield Name (type or print): Tracy L. Warfield		Date: 03/28/2016 Title: President			
Processed 03/28/2016		* Electronically provided signatures are accepted as original signatures.				