

No. C 140093	Due no later than July 31, 2004 Annual Report Form		2. Registered Agent and Office 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 applicable KATHLEEN RANKIN INSURANCE AGENCY, I KATHLEEN CORBARI 6900 OVERLAND RD BOISE, ID 83709		KATHLEEN CORBARI 6900 OVERLAND RD BOISE, ID 83709 3. <u>New Registered Agent Signature.</u> <i>Kathleen Rankin</i>													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Kathleen Rankin</td> <td>6900 Overland Rd.</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Kathleen Rankin	6900 Overland Rd.	Boise	ID	83709
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Kathleen Rankin	6900 Overland Rd.	Boise	ID	83709											
5. Organized Under the Laws of: IDAHO C 140093		6. Signature <i>Kathleen Rankin</i> Date 5/10/04 Name (Typed or Printed) KATHLEEN Rankin Title Agent/President														