

No. W 20245		Due no later than August 31, 2006 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		SUE A BOSWELL 6103 HIGHWAY 52 WEST EMMETT, ID 83617													
		BOSWELL INSURANCE SERVICES, LLC 6103 HIGHWAY 52 WEST EMMETT, ID 83617		3. New Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers.																	
<table><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>owner mgr</td><td>Sue Boswell</td><td>6103 Hwy 52 Emmett, ID</td><td>Emmett</td><td>ID</td><td>83617</td></tr></tbody></table>						Office held	Name	Street or P.O. Address	City	State	Zip	owner mgr	Sue Boswell	6103 Hwy 52 Emmett, ID	Emmett	ID	83617
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5. Organized Under the Laws of: IDAHO W 20245		6. Signature <u>[Signature]</u> Date <u>4/11/06</u> Name (Typed or Printed) <u>Sue Boswell</u> Title <u>owner/mgr</u>															

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