

No. C 208908		Due no later than Feb 28, 2017		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. INTEGRITY INSURANCE SERVICES OF UTAH INC 8751 SOUTH SANDY PARKWAY SANDY UT 84070		DEAN L CAMERON, DIRECTOR IDAHO DEPT OF INS 700 W STATE ST FL 3 BOISE ID 83702		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	
DIRECTOR	DANIEL HARDLE	8751 SOUTH SANDY PARKWAY	SANDY	UT		84070	
5. Organized Under the Laws of: UT C 208908		6. Annual Report must be signed.* Signature: Daniel Hardle Name (type or print): Daniel Hardle Date: 01/02/2017 Title: Director					
Processed 01/02/2017		* Electronically provided signatures are accepted as original signatures.					