No. 61335		INSTRUCTIONS ON REVERSE SIDE			SUED:	Office NO	TA P.O. BÔ
Return To  Secretary of State Room 203, Statel Soise, ID 83720	1. Mail	<b>Due No Later Than</b> Ing Address — <i>Plea</i>	November 1, 1994 Se Correct If Not Correct GERS MANAGEMENT C	<b>★</b> \$\$₹ 3380	R• PXXXXI xXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(XXX	m 83705
·	P.	O. BOX AGE		3. Incorporated Under The Laws			
** FINAL NOTIC NO FEE REQUIR		SE	ID <b>米敦大次</b> 5 83715-6410	NO:	ID 61335		
4. Names and Addresses	of Officers and Di	rectors	MUST BE PRINTED	DA TYP	ED	· · · · · · · · · · · · · · · · · · ·	
	<u>N</u> :	ame	Street or P.O. Address		<u>City</u>	<u>State</u>	<u>Zip</u>
President: Secretary:	y: Merlyn D. Colpron		P. O. Box 16410 P. O. Box 16410		Boise Boise	ID ID	8371 8371
Directors:			P. O. Box 16410 P. O. Box 287 4900 Boise River L	ane	Boise Bountiful Boise	ID UT ID	8371! 8401 83706
						٠	
5. Nature of Business  Insurance Company Attorney-in-Fact		6. I certify that the true, correct a	nis Annual Report has been exe nd confiplete	mined by r		est of my l	knowledge
Incurance Co		i adiament		77 7		sident	