

No. C 133769		Due no later than May 31, 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. OLSON INSURANCE AGENCY INC. RICHARD LEE OLSON 121 EVANS LANE CHUBBUCK ID 83202		RICHARD LEE OLSON 121 EVANS LANE CHUBBUCK ID 83202			
						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	RICHARD L OLSON	4965 APACHE AVE	POCATELLO	ID	USA	83202	
DIRECTOR	CINDY D OLSON	4965 APACHE AVE	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of: ID C 133769		6. Annual Report must be signed.* Signature: Richard Lee Olson Name (type or print): Richard Lee Olson					
		Date: 04/26/2017 Title: President					
Processed 04/26/2017		* Electronically provided signatures are accepted as original signatures.					