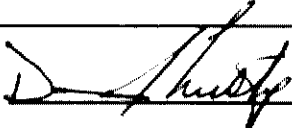


No. C118042	Annual Report Form Due No Later Than November 30, 1997		2 Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1 Mailing Address - Please Correct, If Not Correct CAMAS PRAIRIE INSURANCE, INC DOMINIC J LUSTIG P O BOX 484 576		DOMINIC J LUSTIG 608 KING ST COTTONWOOD ID 83522
* FIRST NOTICE *		COTTONWOOD ID 83522	3 Organized Under the Laws of ID C118042
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
<u>State</u>	<u>Zip</u>		
Pres. / Treas.	Dominic J. Lustig	P.O. Box 481	Cottonwood ID 83522
V.Pres. / Sec.	Shelli Schumacher	P.O. Box 152	Cottonwood ID 83522
Directors - Same as above.			
5.		6.	
		Signature <u></u> Date <u>7-17-97</u>	
		Name (Typed or Printed) <u>Dominic J. Lustig</u> Title <u>President</u>	

ISSUED: 07-04-1997 DO NOT TAPE OR STAPLE 11608