

## INSTRUCTIONS ON REVERSE SIDE

No. 047618	Idaho Corporation Annual Report Form		2. Registered Agent and Office																															
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  38 OCT 3 1988	Due No Later Than November 1, 1988		CT CORPORATION SYSTEM 300 NORTH 6TH ST. BOISE, IDAHO 82702																															
	1. Mailing Address — Please Correct 047618	3. Incorporated Under The Laws of  STATE OF IDAHO																																
	CITICORP INSURANCE AGENCY, INC. MAIL STATION #22 P. O. BOX 27332 ST. LOUIS, MISSOURI 83141			ENTERED OCT 3 1988																														
4. Names and Addresses of Officers and Directors																																		
<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: Richard E. Burke</td> <td colspan="4">Address for all:</td> </tr> <tr> <td>Secretary: Richard M. Zuckerman</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors: Richard E. Burke</td> <td>P.O. Box 27332</td> <td>St. Louis</td> <td>MO</td> <td>63141</td> </tr> <tr> <td>Christopher J. Gaia</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>James A. Murphy</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: Richard E. Burke	Address for all:				Secretary: Richard M. Zuckerman					Directors: Richard E. Burke	P.O. Box 27332	St. Louis	MO	63141	Christopher J. Gaia					James A. Murphy				
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5. Nature of Business Insurance Sales		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Signature <u>Stephen C. Lowry</u> Date <u>9/29/88</u> Name (Typed or Printed) <u>Stephen C. Lowry</u> Title <u>Assistant Treasurer</u>																																