No. C 184664	Due no later than Oct 31, 2010	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	HEATH S BOWEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ALLEGIS INSURANCE AGENCY INC. 150 SOCIAL HALL AVE STE 690 SALT LAKE CITY UT 84111	2410 E 25TH CIR IDAHO FALLS ID 83404			
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered	I Agent S	ignature:*	
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 CHRIS M M	IILLER 150 SOCIAL HALL AVE STE 690	SALT LAKE CITY	υT	USA	84111
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
UT	Signature: Susan DeBusk	Date: 08/10/2010			
C 184664	Name (type or print): Susan DeBusk	Title: Office Administrator			
Processed 08/10/2010	* Electronically provided signatures are accepted as original signatures.				