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|--|----------------|--|---------------|--|---------|-------------|--|
| No. C 157127 | | Due no later than Oct 31, 2006 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. BRIAN GOETZ INSURANCE AGENCY, INC. BRIAN GOETZ 1701 N 3RD ST COEUR D ALENE ID 83814 | | BRIAN GOETZ 1701 N 3RD ST COEUR D ALENE ID 83814 | | | |
| | | | | 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 | BRIAN R GOETZ | 1701 N 3RD ST | COEUR D ALENE | ID | USA | 83814 | |
| SECRETARY | BRENDA R GOETZ | 1701 N 3RD ST | COEUR D ALENE | ID | USA | 83814 | |
| 5. Organized Under the Laws of: IDAHO C 157127 | | 6. Annual Report must be signed.* Signature: Brian Goetz Name (type or print): Brian Goetz Date: 10/25/2006 Title: President | | | | | |
| Processed 10/25/2006 | | * Electronically provided signatures are accepted as original signatures. | | | | | |