

ISSUED JULY 1, 1989

No. 76333

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1989

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

SEC. OF STATE

1. Mailing Address — Please Correct

76333

IDA-WEST INSURANCE SERVICES, INC
LOWELL HORNE
P.O. BOX 4005

BOISE

ID 83704

2. Registered Agent and Office

LOWELL HORNE
4010 GLENWOOD ROAD

BOISE

ID 83704

3. Incorporated Under The Laws
of IDAHO

NO: 76333

89 JUL 14 AM 10:37

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	Lowell C Horne	P.O. Box 4005	Boise	ID.	83711
Secretary:	Gloria M Horne	P.O. Box 4005	Boise	ID	83711
Directors:					

5. Nature of Business

INSURANCE

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

Name (Typed or
Printed)

Lowell C Horne
LOWELL C. HORNE

Date

Title

OWNER