

No. C106430	Annual Report Form Due No Later Than November 30, 1999	2. Registered Agent and Office NOT A P.O. BOX PATRICK COLLINS 877 MAIN ST STE 1000 FIRST INTERSTATE CENTER BOISE ID 83701
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 WMFS INSURANCE SERVICES OF I HAWLEY TROXELL ENNIS & HA 877 MAIN ST STE 1000 FIRST INTERSTATE CENTER BOISE ID 83701	3. Organized Under the Laws of: ID C106430
** FINAL NOTICE **		
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>
President + Director	J. Pamela Boudon	8620 W. Emerald Suite 110 Boise ID 83707
Secretary	Suzanne M. Kunkling	8620 W. Emerald Suite 110 Boise ID 83707
Director	Stacey B. Arcus	8620 W. Emerald Suite 110 Boise ID 83707
Director	Craig S. Davis	8620 W. Emerald Suite 110 Boise ID 83707
Director	William A. Longwater	8620 W. Emerald Suite 110 Boise ID 83707
Director	Deanne Lottan Oppenheimer	8620 W. Emerald Suite 110 Boise ID 83707
5. <u>New</u> Registered Agent Signature		6. Signature <u>Michael M. Hubbard</u> Date <u>11/20/99</u> Name (Typed or Printed) <u>Michael M. Hubbard</u> Title <u>Corporate Counsel</u>

ISSUED: 10-01-1999

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