No. C 152995	Due no later than February 28, 2006 Annual Report Form	2. Registered Agent and Office 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	1. Mailing Address - Correct in this box, if applicable JOHN OLSEN INSURANCE AND FINANCIAL 2073 S BEARTOOTH WAY MERIDIAN, ID 63642 2411 S. Bear Claw Way Meridian, ID 83642	JOHN OLSEN 2079 S BEARTOOTH WAY MERIDIAN, ID 83642 2411 S. Bear Claw Way 3. New Registered Agent Signature
	es and Business Addresses of President, Secreta	ary and Directors.
Office held Name President John Ols	Street or P.O. Address en 2411 S Bear Claw Way Mo	ty <u>State</u> Zip いさい ID 83612
5. Organized Under the Laws of: IDAHO C 152995	Signature John Oken Name Printed) Lin Oken	Date 1-18-06 Title President
	Do Not Tape or Staple	200602004754

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