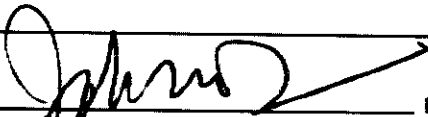
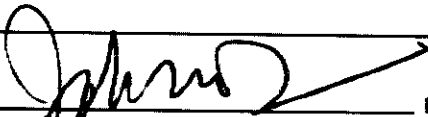
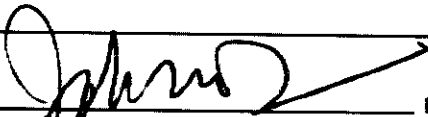


| <b>No.</b> C124273   | <b>Annual Report Form 1999</b><br>Due No Later Than November 30,   |   | <b>2. Registered Agent and Office NOT A P.O. BOX</b><br><b>JOHN W DIES</b><br><del>1007 G WARM SPRINGS RD</del><br>460 Sun Valley Road #202<br>KETCHUM ID 83340 |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
|--|--|---|---|---|--------------|--------------------------------------|-----------------|--------------|------------|-----------|--------------|-----------|---------|----|-------|-----------|---------------|--------|--|--|--|
| <b>Return to:</b><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FEE REQUIRED</b><br><br><b>★ FIRST NOTICE ★</b>   | <b>1 Mailing Address Please Correct If Not Correct</b><br><b>SUN VALLEY INSURANCE, INC.</b><br><br><b>P O BOX 5808</b><br><br><b>KETCHUM ID 83340</b>  |   | <b>3. Organized Under the Laws of:</b><br><br><b>ID C124273</b>   |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
|  | <b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b><br><b>Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</b> |   |   |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%; text-align: left;"><u>Office held</u></th> <th style="width: 20%; text-align: left;"><u>Name</u></th> <th style="width: 30%; text-align: left;"><u>Street or P.O. Address</u></th> <th style="width: 15%; text-align: left;"><u>City</u></th> <th style="width: 10%; text-align: left;"><u>State</u></th> <th style="width: 15%; text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>president</td> <td>John W. Dies</td> <td>PO Box 36</td> <td>Ketchum</td> <td>ID</td> <td>83340</td> </tr> <tr> <td>secretary</td> <td>Jennifer Dies</td> <td>(same)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |  |   |   | <u>Office held</u>  | <u>Name</u>  | <u>Street or P.O. Address</u>        | <u>City</u>     | <u>State</u> | <u>Zip</u> | president | John W. Dies | PO Box 36 | Ketchum | ID | 83340 | secretary | Jennifer Dies | (same) |  |  |  |
| <u>Office held</u>   | <u>Name</u>  | <u>Street or P.O. Address</u>   | <u>City</u>   | <u>State</u>  | <u>Zip</u>   |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| president  | John W. Dies   | PO Box 36   | Ketchum   | ID  | 83340        |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| secretary  | Jennifer Dies  | (same)  |   |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| <b>5. Signature of New Registered Agent</b>  |  | <b>6.</b><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Signature' </td> <td style="width: 50%;">Date 7/13/99</td> </tr> <tr> <td>Name (Typed or Printed) John W. Dies</td> <td>Title president</td> </tr> </table> |   | Signature'  | Date 7/13/99 | Name (Typed or Printed) John W. Dies | Title president |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| Signature'   | Date 7/13/99   |   |   |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |
| Name (Typed or Printed) John W. Dies   | Title president  |   |   |   |              |                                      |                 |              |            |           |              |           |         |    |       |           |               |        |  |  |  |

ISSUED: 07-03-1999

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