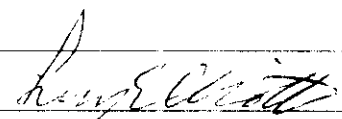


No. C 148637	Due no later than April 30, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ELLWINS INSURANCE CO., INC. LEROY ELLIOTT 1201 FALLS AVE E STE 20 862 Blue Lakes Blvd. N TWIN FALLS, ID 83301	LEROY ELLIOTT 1201 FALLS AVE E STE 20 TWIN FALLS, ID 83301 3. New Registered Agent Signature																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>LeRoy Elliott</td> <td>3415 North 1200 East Buhl.</td> <td>ID.</td> <td></td> <td>83316</td> </tr> <tr> <td>Vice-President</td> <td>Margaret Elliott-Winsryg</td> <td>3415 N 1200 E Buhl.</td> <td>ID</td> <td></td> <td>83316</td> </tr> <tr> <td colspan="6">Directors - Same</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	LeRoy Elliott	3415 North 1200 East Buhl.	ID.		83316	Vice-President	Margaret Elliott-Winsryg	3415 N 1200 E Buhl.	ID		83316	Directors - Same					
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Directors - Same																										
5. Organized Under the Laws of: IDAHO C 148637	6. Signature  Date <u>3-1-05</u> Name (Type or Print) <u>Leroy Elliott</u> Title <u>President</u>																									