

No. C 69445		Due no later than Apr 30, 2009 Annual Report Form		2. Registered Agent and Address (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 needed. INDEPENDENT MARKETING & INSURANCE SERVICES, INC. LEON EDDINS 2443 BRUINS CIRCLE BOISE ID 83704		LEON EDDINS 2443 BRUINS CIRCLE BOISE ID 83704			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	LEON R EDDINS	2443 BRUINS CIR.	BOISE	ID	USA	83704-6241	
5. Organized Under the Laws of: ID C 69445		6. Annual Report must be signed.* Signature: Leon r Eddins Name (type or print): Leon r Eddins Date: 02/13/2009 Title: Pres.					
Processed 02/13/2009		* Electronically provided signatures are accepted as original signatures.					