

No. 76496	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office																									
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>	Due No Later Than November 1, 1990		LARRY J. RICKS																									
	1. Mailing Address — Please Correct		1587 E. 17TH																									
	RICKS INSURANCE SERVICE, IN LARRY J. RICKS 1587 EAST 17TH STREET  IDAHO FALLS ID 83404		IDAHO FALLS ID 83404 566  3. Incorporated Under The Laws of ID NO: 076496																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>LARRY Ricks</td> <td>1587 E. 17th</td> <td>Idaho Falls</td> <td>Id.</td> <td>83404</td> </tr> <tr> <td>Secretary:</td> <td>MARY Ricks</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	LARRY Ricks	1587 E. 17th	Idaho Falls	Id.	83404	Secretary:	MARY Ricks					Directors:					
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President:	LARRY Ricks	1587 E. 17th	Idaho Falls	Id.	83404																							
Secretary:	MARY Ricks																											
Directors:																												
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
Insurance		<table border="0"> <tr> <td>Signature</td> <td><i>Larry J. Ricks</i></td> <td>Date</td> <td>9/7/90</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>LARRY J. Ricks</td> <td>Title</td> <td>President</td> </tr> </table>			Signature	<i>Larry J. Ricks</i>	Date	9/7/90	Name (Typed or Printed)	LARRY J. Ricks	Title	President																
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