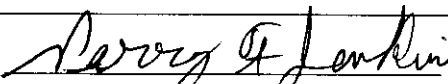


No. C 97915	Due no later than Mar 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<div style="background-color: black; color: white; padding: 2px; text-align: center;">1. Mailing Address - Correct in this box, if applicable</div> JENKINS INSURANCE SERVICES, INC. PERRY F JENKINS 24658 HOMEDALE RD WILDER, ID 83676	PERRY F JENKINS 24658 HOMEDALE RD WILDER, ID 83676
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
PRES.	PERRY F. JENKINS	24658 HOMEDALE RD	WILDER	ID	83676
SEC.	LORI A. JENKINS	" "	" "	" "	" "

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 97915</div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>PERRY F. JENKINS</u> </div> <div style="width: 35%;"> Date <u>1/23/01</u> Title: <u>PRES.</u> <div style="text-align: center;">XXXX</div> </div> </div>
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