	INSTRUCTIONS ON REVERSE SIDE	
No. 78154	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1,1991	THOMAS S. NIELD 2755 POLELINE ROAD
	NTELD, INC. THOMAS S. NIELD P.O. POX 578	POCATELLO ID 83201 3. Incorporated Under The Laws of ID
NO FEE REQUIRED	POCATELLO ID 83204	NO: 078154
4. Names and Addresses of Office	rs and Directors	
Secretary: Karen	Name Street or P.O. Address S. Nield 244 Adams H. Nield 244 Adams S. Nield 244 Adams	Chubbuck ID 83202 Chubbuck, ID 83202 Chubbuck, ID 83202
5. Nature of Business Insurance Agency	6. I certify that this Annual Report has been extrue, correct and complete. Signature Name (Paper or Thomas S.)	amined by me and is to the best of my knowledge Date 7/9/9/ Title 7/65