

No. C 133298		Due no later than Mar 31, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. HASKIN INSURANCE SERVICES, INC. MICHAEL E HASKIN PO BOX 306 RUPERT ID 83350		MICHAEL E HASKIN 629 FREMONT AVE RUPERT ID 83350			
				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	
SECRETARY	TRACY L HASKIN	PO BOX 291 1140 18TH ST	HEYBURN	ID	USA	83336	
PRESIDENT	MICHAEL E HASKIN	PO BOX 291 1140 18TH ST	HEYBURN	ID	USA	83336	
5. Organized Under the Laws of: ID C 133298		6. Annual Report must be signed.* Signature: Michael E Haskin Name (type or print): Michael E Haskin Date: 02/03/2014 Title: President					
Processed 02/03/2014		* Electronically provided signatures are accepted as original signatures.					