No. <b>C 176227</b>		Due no later than Dec 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SMITH BECKY			
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.  STERLING SMITH INSURANCE SERVICES, INC. BECKY L SMITH 4493 N BUCKBOARD PLACE BOISE ID 83713 USA		4493 N BUCKBOARD PLACE BOISE ID 83713			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names	and Busin	ess Addresses of President, Secretary, and Directors. T	reasurer (	optional).			
Office Held Na	ame	Street or PO Address		City	State	Country	Postal Code
SECRETARY MARK S SMITH PRESIDENT BECKY L SMITH TREASURER MARK S SMITH		ITH 4493 N BUCKBOARD PLACE		BOISE BOISE BOISE	ID ID ID	USA USA USA	83713 83713 83713
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Becky L Smith		Date: 10/	15/2012		
C 176227		Name (type or print): Becky L Smith	Date: 10/15/2012 Title: President				
* Electronically provided signatures are accepted as original signatures.							