

Annual Report Form

Due No Later Than November 30,

1998

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

★ FIRST NOTICE ★

1. Mailing Address - Please Correct, If Not Correct

DAVID L. CRAWFORD INSURANCE
DAVID L CRAWFORD
803 16TH AVE STE #2

LEWISTON

ID 83501

2. Registered Agent and Office NOT A P.O. BOX

DAVID L CRAWFORD
308 MAIN ST

LEWISTON

ID 83501

3. Organized Under the Laws of:

ID

C112891

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

President

David L. Crawford

906 Burrell Ave

Lewiston

ID

83501

Secretary

Melinda A. Crawford

906 Burrell Ave

Lewiston

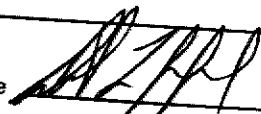
ID

83501

5. Signature of New Registered Agent

6.

Signature



Date

7/24/98

Name

(Typed or Printed)

David L. Crawford

Title

President

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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