

No. W 4470	Due no later than Aug 31, 2001		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form		BERYL E DEBOARD 1016 MAIN ST SALMON, ID 83467		
NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable SALMON VALLEY INSURANCE, LLC BERYL E DEBOARD 1016 MAIN ST SALMON, ID 83467		3. <u>New Registered Agent Signature</u>		
4. Limited Liability Companies: Enter Names and Addresses of Members.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Beryl E. DeBoard	1016 Main Street	Salmon, ID	83467	
5. Organized Under the Laws of:	6.	Signature	Date <u>6-11-01</u>		
IDAHO W 4470		<small>(Typed or Printed)</small>	Beryl E. DeBoard	Title <u>member</u>	