

No. <b>C 50620</b>		<b>Due no later than Dec 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ALPINE INSURANCE AGENCY, INC. STEPHEN D FRANSEN 1095 9TH STREET IDAHO FALLS ID 83404 USA		CAROLYN A PETERSON 1095 9TH STREET IDAHO FALLS ID 83404				
						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		
VICE PRESIDENT	STEPHEN D FRANSEN	1095 9TH STREET	IDAHO FALLS	ID	USA	83404		
PRESIDENT	CAROLYN A PETERSON	1095 9TH STREET	IDAHO FALLS	ID	USA	83404		
5. Organized Under the Laws of:  <b>ID</b> <b>C 50620</b>		6. Annual Report must be signed.*  Signature: Stephen D. Fransen Name (type or print): Stephen D. Fransen						Date: 10/17/2013  Title: Vice President
Processed 10/17/2013		* Electronically provided signatures are accepted as original signatures.						