

No. W 2070

Annual Report Form

1997

Due No Later Than November 30,

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

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

BRUCE BEAN FAMILY INSURANCE,
BRUCE BEAN
872 S 400 W

BURLEY

ID 83318

BRUCE BEAN
872 S 400 W

BURLEY ID 83318

3. Organized Under the Laws of:

ID W 2070

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

| | | | | | |
|---------|--------------|-------------|--------|----|-------|
| Manager | Bruce Bean | 872 S 400 W | Burley | ID | 83318 |
| Member | Barbara Bean | " | " | " | " |
| Member | Nancy Bean | " | " | " | " |
| Member | Susan Bean | " | " | " | " |
| Member | Brent Bean | " | " | " | " |
| Member | Ronald Bean | 397 W 800 S | " | " | " |

5. SIGNATURE OF CURRENT RA

6.

Signature

Name (Typed or Printed)

Date

Title

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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