

No. C 88277	Due no later than Dec 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX GARY MICHAEL MILLER 6412 KOOTENAI BONNERS FERRY, ID 83805												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable KAYSER INSURANCE AGENCY, INC. GARY MICHAEL MILLER BOX 1538 BONNERS FERRY, ID 83805	3. <u>New</u> Registered Agent Signature												
NO FILING FEE IF RECEIVED BY DUE DATE														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.														
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Office held</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street or P.O. Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>State</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black;">Pres</td> <td style="border-bottom: 1px solid black;">Mike Miller</td> <td style="border-bottom: 1px solid black;">P.O. Box 1538</td> <td style="border-bottom: 1px solid black;">Bonners Ferry</td> <td style="border-bottom: 1px solid black;">Id</td> <td style="border-bottom: 1px solid black;">83805</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	Mike Miller	P.O. Box 1538	Bonners Ferry	Id	83805
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 88277 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> Signature <i>Mike Miller</i> </td> <td style="width: 40%; border-bottom: 1px solid black;"> Date <i>10/24/02</i> </td> </tr> <tr> <td style="border-bottom: 1px solid black;"> Name (Typed or Printed) <i>Mike Miller</i> </td> <td style="border-bottom: 1px solid black;"> Title <i>Pres</i> </td> </tr> </table>		Signature <i>Mike Miller</i>	Date <i>10/24/02</i>	Name (Typed or Printed) <i>Mike Miller</i>	Title <i>Pres</i>								
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