

No. C 37581

Annual Report Form

1996

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

1. Mailing Address - Please Correct, If Not Correct

WALRATH INSURANCE AGENCY, IN
NEAL A. JOHNSON
P O BOX 788NEAL A. JOHNSON
163 JOHNSON AVE.

OROFINO ID 83544

3. Organized Under the Laws of:

ID C 37581

★ FIRST NOTICE ★

OROFINO ID 83544

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

Office heldNameStreet or P.O. AddressCityStateZip

PRESIDENT

NEAL A JOHNSON

P. O. BOX 788

OROFINO

ID

83544

SECRETARY

JEANNIE JOHNSON

P. O. BOX 788

OROFINO

ID

83544

DIRECTORS:

BRIAN JOHNSON

P. O. BOX 788

OROFINO

ID

83544

TRACY TUCKER

4850 CLARK ST. APT #3

BOISE

ID

83705

5. NATURE OF BUSINESS

INSURANCE AGENCY

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct, and complete.

Signature

Date 7-18-96

Name (Typed or Printed)

NEAL A JOHNSON

Title

PRESIDENT

ISSUED: 07-06-1996

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