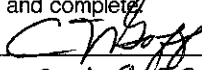


No. 71540 <i>Return To</i> Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1990</i> <hr/> 1. Mailing Address — Please Correct NEAL GOFF INSURANCE AGENCY NEAL GOFF 342 310 SOUTH KIMBALL CALDWELL ID 83605	2. Registered Agent and Office NEAL GOFF 342 310 SOUTH KIMBALL CALDWELL ID 83605
		3. Incorporated Under The Laws of ID NO: 071540

4. Names and Addresses of Officers and Directors					
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	C. NEAL GOFF	1223 Pine	Caldwell	Id	83605
Secretary:	JOYCE E. GOFF	1223 Pine	Caldwell	Id	83605
Directors:	DAVID P. GOFF	1223 Pine	Caldwell	Id	83605

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 <div style="display: flex; justify-content: space-between;"> <div> Signature  Name (Typed or Printed) <u>C. N. Goff</u> </div> <div> Date <u>7-9-90</u> Title <u>PRES</u> </div> </div>
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