

No. C 92817		Due no later than Jul 31, 2013		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. VALLEY INSURANCE, INC. VERN BASTIAN 970 GRANDVIEW DR MALAD ID 83252 USA		VERN K. BASTIAN 970 GRANDVIEW DR MALAD CITY ID 83225-2000		
				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
DIRECTOR	CONNIE BASTIAN	970 GRANDVIEW DR	MALAD	ID	USA	83252
DIRECTOR	VERN BASTIAN	970 GRANDVIEW DR	MALAD	ID	USA	83252
SECRETARY	CONNIE BASTIAN	970 GRANDVIEW DR	MALAD	ID	USA	83252
PRESIDENT	VERN BASTIAN	970 GRANDVIEW DR	MALAD	ID	USA	83252
5. Organized Under the Laws of: ID C 92817		6. Annual Report must be signed.* Signature: Connie Bastian Name (type or print): Connie Bastian Date: 05/29/2013 Title: Secretary				
Processed 05/29/2013		* Electronically provided signatures are accepted as original signatures.				