

|  |   |   |   |       |         |             |
|--|---|---|---|-------|---------|-------------|
| No. <b>C 100475</b>  | <b>Due no later than Dec 31, 2011</b><br><b>Annual Report Form</b>  |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>TED WATSON INSURANCE, INCORPORATED<br>TED WATSON<br>2433 GOVERNMENT WAY<br>COEUR D' ALENE ID 83814 |   | TED WATSON<br>2433 GOVERNMENT WAY<br>COEUR D'ALENE ID 83814 |       |         |             |
|  |   |   | 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 |
| PRESIDENT  | THEODORE O WATSON   | 2433 N GOVERNMENT WAY   | COEUR D'ALENE   | ID    | USA     | 83814       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 100475</b>  | 6. Annual Report must be signed.*<br>Signature: Ted Watson<br>Name (type or print): Ted Watson  |   | Date: 01/10/2012<br>Title: President                        |       |         |             |
| Processed 01/10/2012   |   | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |

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