

No. C 97915	Due no later than Mar 31, 2010 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. JENKINS INSURANCE SERVICES, INC. PERRY F JENKINS 2805 W. SOUTH SLOPE EMMETT ID 83617 USA		PERRY F JENKINS 2805 W. SOUTH SLOPE EMMETT ID 83617			
			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
SECRETARY	LORI A JENKINS	2805 W. SOUTH SLOPE	EMMETT	ID	USA	83617
5. Organized Under the Laws of: ID C 97915		6. Annual Report must be signed.* Signature: Perry F. Jenkins Name (type or print): Perry F. Jenkins		Date: 05/06/2010 Title: President		
Processed 05/06/2010		* Electronically provided signatures are accepted as original signatures.				