No. C 155775		Due no later than Jul 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		50.00 September 100.00 September 100.00	KELLY KIMBALL 5469 N NORTH GLEN LANE BOISE ID 83714			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		KIMBALL FAMILY INSURANCE, INC. KENNETH M. Kimball 7154 W STATE STREET SUITE 193 BOISE ID 83714 USA		BOISE ID				
				3. <u>New</u> Regis	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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 KENNETH M		KIMBALL	5469 N NORTH GLEN LANE	BOISE	ID	USA	83714	
VICE PRESIDENT KELLY D KIMBALL		1BALL	5469 N NORTH GLEN LANE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 155775		Signature: KELLY		Date: 05/29/2018				
		Name (type or pri		Title: VP/Sec Treas				
Processed 05/29/2018		* Electronically provided signatures are accepted as original signatures.						