

No. <b>W 12388</b>		<b>Due no later than Jul 31, 2008</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		KELLY F EGAN 102 SUPERIOR STREET SANDPOINT ID 83864			
		<b>1. Mailing Address: Correct in this box if needed.</b> NORTH IDAHO INSURANCE, LLC KELLY F EGAN 102 SUPERIOR STREET SANDPOINT ID 83864 USA		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	JOHN K RICHARDSON	102 SUPERIOR STREET	SANDPOINT	ID	USA	83864	
MANAGER	KELLY F EGAN	102 SUPERIOR STREET	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:  <b>ID W 12388</b>		6. Annual Report must be signed.* Signature: Kelly Egan Name (type or print): Kelly Egan Date: 07/15/2008 Title: Manager					
Processed 07/15/2008		* Electronically provided signatures are accepted as original signatures.					