

No. <b>C 154501</b>	<b>Due no later than May 31, 2007</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>		JEFFREY ANDERSON 3946 JORDAN CIRCLE IDAHO FALLS ID 83406			
	ANDERSON LIFE & HEALTH AGENCY, INC. 329 S WOODRUFF IDAHO FALLS ID 83401		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	JEFFERY ANDERSON	3946 JORDAN CIRCLE	IDAHO FALLS	ID	USA	83406
SECRETARY	JEFFERY ANDERSON	3946 JORDAN CIRCLE	IDAHO FALLS	ID	USA	83406
DIRECTOR	JEFFERY ANDERSON	3946 JORDAN CIRCLE	IDAHO FALLS	ID	USA	83406
5. Organized Under the Laws of:  <b>IDAHO C 154501</b>	6. Annual Report must be signed.*					
Signature: JEFFERY ANDERSON		Date: 03/07/2007				
Name (type or print): JEFFERY ANDERSON		Title: PRESIDENT				
Processed 03/07/2007		* Electronically provided signatures are accepted as original signatures.				