

No. <b>59793</b>	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>	<i>Due No Later Than November 1, 1990</i>		
	1. Mailing Address — <i>Please Correct</i>		
	JOHN S. LANGS INSURANCE AGE JOHN S. LANGS 107 EAST KOOTENAI ST.  BONNERS FERRY ID 83805		JOHN S. LANGS 107 EAST KOOTENAI ST  BONNERS FERRY ID 83805  3. Incorporated Under The Laws of ID  NO: 059793

## 4. Names and Addresses of Officers and Directors

Name	Street or P.O. Address	City	State	Zip
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President:	John Langs	PO Box 877, Bonners Ferry, ID 83805		
Secretary:	Rebecca Langs	PO Box 877, Bonners Ferry, ID 83805		
Directors:	John Langs	PO Box 877, Bonners Ferry, ID 83805		
	Rebecca Langs	PO Box 877, Bonners Ferry, ID 83805		

## 5. Nature of Business

Insurance Agency

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

John Langs

Date

Title

Pres

7-12-90