

No. C 150357		Due no later than Aug 31, 2012		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. JULIE P. KEENEY INSURANCE AGENCY, INC. JULIE P KEENEY 1511 3RD STREET SOUTH NAMPA ID 83651		JULIE P KEENEY 1511 3RD STREET SOUTH NAMPA ID 83651			
				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	JULIE P KEENEY	1511 3RD STREET SOUTH	NAMPA	ID	USA	83651	
5. Organized Under the Laws of: ID C 150357		6. Annual Report must be signed.* Signature: Julie Keeney Name (type or print): Julie Keeney Date: 06/20/2012 Title: President					
Processed 06/20/2012		* Electronically provided signatures are accepted as original signatures.					