



# Idaho Corporation Annual Report Form

File online at: [SOSBIZ.idaho.gov](http://SOSBIZ.idaho.gov)

Due on/Before: 12/31/2018

Reporting Year: 2018

Return completed form within 30 days

Idaho Secretary of State  
Attn: Annual Reports  
450 North 4th Street  
Boise, ID 83702  
Phone: (208) 334-2300

**Annual Report: No filing fee if received by due date.**  
If reinstatement is required, the reinstatement fee is \$30.00.

SOS Control Number: 446504

Filing Status: Active-Good Standing

General Business Corporation (D)

Date Formed: 12/13/2002

Formation Locale: ID

## Name and Mailing Address:

TOM WOODS INSURANCE, INC.  
308 MAIN ST  
LEWISTON, ID 83501

(1) Add or Change Mailing Address:

## Registered Agent (RA) and Registered Office (RO) Address:

EDWIN L LITTENEKER  
322 MAIN ST  
LEWISTON, ID 83501

(2) Change RA and/or RO Address:

Note: The Registered Office address must be an Idaho address.

## (3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Corporations: Enter names and business addresses (with zip code) of the President, Vice President, Secretary, Treasurer.

Title	Name	Business Address	City, State, Zip
President	Thomas V. Woods	308 Main St	Lewiston, ID 83501
VP	Carey A. Woods	308 Main St	Lewiston ID 83501

(5) Board of Directors names and business address (with zip code). Attach additional sheet if necessary.

Name	Business Address	City, State, Zip

(5) Signature:

*Thomas V. Woods*

(6) Date:

12/31/18

(7) Type/Print Name:

Thomas V. Woods

(8) Title:

President

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating.  
Sign and date this form and return to the address provided above.

B0079-2530 01/25/2019 11:08 AM Received by ID Secretary of State Lawrence Denney