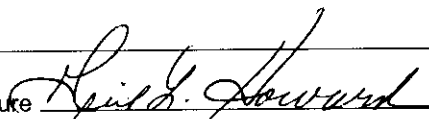
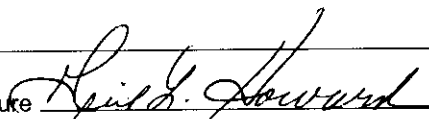
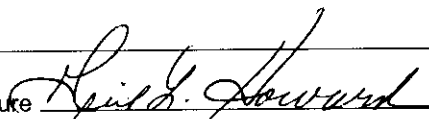


No. C 87028	Due no later than Jun 30, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX APRIL L HOWARD 3386 WILLIAMSBURG WAY BOISE, ID 83706
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable HOWARD INSURANCE AGENCY, INC. APRIL L HOWARD 2417 BANK DR STE 200 BOISE, ID 83705		3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President / All Offices	April L. Howard	2417 BANK DR Suite 200 Boise Idaho 83705	Boise	Id	83705
Board member	Jerry O Howard	2417 BANK DR Suite 200	Boise	Id	83705

5. Organized Under the Laws of: IDAHO C 87028	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date 4-5-02</td> </tr> <tr> <td>Name (Typed or Printed) APRIL L HOWARD</td> <td>Title President</td> </tr> </table>	Signature 	Date 4-5-02	Name (Typed or Printed) APRIL L HOWARD	Title President
Signature 	Date 4-5-02				
Name (Typed or Printed) APRIL L HOWARD	Title President				