No. C 202370		Due no later than Jun 30, 2015 2. Registered Agent and Address (NO PO BOX)						
Return to:		Annual Report Form DIRECTOR BILL DEAL						
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.			IDAHO DEPARTMENT OF INSURANCE 700 W STATE ST FL 3 BOISE 83702 3. New Registered Agent Signature:*			
		BROWN'S INSURANCE AGENCY INC JEFFREY N BROWN 9170 PRINCE WILLIAM ST MANASSAS VA 20110		BOISE 83702				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busine	ess Addresses of Pr	esident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Na	ame		Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT MI	CHARD E ICHAEL C EFFREY N I	BROWN	715 VILLAGE RD 12620 WARRENTON RD 9170 PRINCE WILLIAM ST	CHARLOTTESVILLE NOKESVILLE MANASSAS	VA VA VA	USA USA	22903 20181 20110	
		C. Assert Bassats	and by stand w					
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
VA C 202370		Signature: Jeffrey N Brown			Date: 04/20/2015			
		Name (type or p		Title: President				
Processed 04/20/2015	* Electronically provided signatures are accepted as original signatures.							