

No. C108156	<p align="center">Annual Report Form Due No Later Than November 30, 1999</p>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	<p>1. Mailing Address: Please Correct: <input checked="" type="checkbox"/> Not Correct <input type="checkbox"/></p> <p align="center">INDEPENDENT INSURANCE SALES NICHOLAS J ANDROLEWICZ 890 N COLE RD #A 1554 LINDEN RD 83687-8016 BOISE NAMPA ID 83704-83687</p>				
<p>2. Registered Agent and Office NOT A P.O. BOX</p> <p align="center">NICHOLAS J ANDROLEWICZ 890 N COLE RD #A 1554 LINDEN RD BOISE NAMPA ID 83704-83687</p>					
<p>3. Organized Under the Laws of: ID C108156</p>					
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)</p>					
<p><u>Office held</u></p> <p>President,</p> <p>Director,</p> <p>Secretary,</p>	<p><u>Name</u></p> <p>Nick J ANDROLEWICZ,</p> <p>Elizabeth ANDROLEWICZ,</p> <p>Dale Watt,</p>	<p><u>Street or P.O. Address</u></p> <p>1554 Linden NAMPA, ID 83687-8016</p> <p>SAME AS Above</p> <p>P.O. Box 373, NAMPA, ID 83653</p>	<p><u>City</u></p> <p>NAMPA</p>	<p><u>State</u></p> <p>ID</p>	<p><u>Zip</u></p> <p>83687-8016</p>
<p>5. Signature of New Registered Agent</p>		<p>6.</p> <p>Signature <u>Nick J ANDROLEWICZ</u> Date <u>7-26-99</u></p> <p>Name (Typed or Printed) <u>Nick ANDROLEWICZ</u> Title <u>President</u></p>			

ISSUED: 07-03-1999

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