

No. 080809	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988	2. Registered Agent and Office																				
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE JUN 14 PM 3 01	1. Mailing Address — Please Correct 080809	BOB WILL CUTS THIRD AND GROVE PARMA, IDAHO 83605 ENTERED JUL 26 1988																				
	BOB WILL CUTS INSURANCE AGENCY, I BOB WILL CUTS RT. 6, BOX 160 CALDWELL, IDAHO 83605	3. Incorporated Under The Laws of STATE OF IDAHO																				
4. Names and Addresses of Officers and Directors																						
	<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: Bob Willcuts</td> <td>RT6 Box 160</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> <tr> <td>Secretary: Jane Willcuts</td> <td>RT6 Box 160</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Name	Street or P.O. Address	City	State	Zip	President: Bob Willcuts	RT6 Box 160	Caldwell	Id	83605	Secretary: Jane Willcuts	RT6 Box 160	Caldwell	Id	83605	Directors:					
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Directors:																						
5. Nature of Business Insurance Agency	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature: <u>Bob Willcuts</u> Name (Typed or Printed): <u>Bob Willcuts</u> Date: <u>July 13 1988</u> Title: <u>President</u>																					