

No. C 24966	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX RONALD B. HOWELL 755 NORTH MAIN, SUITE B POCATELLO ID 83204
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct KRUSE INSURANCE, INC. RONALD B. HOWELL P. O. BOX 489 POCATELLO ID 83204		3. Organized Under the Laws of: ID C 24966
* FIRST NOTICE *			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
President	Ronald B. Howell	379 Fairway Dr	Pocatello ID 83201
Secretary	Janice J. Howell	379 Fairway Dr.	Pocatello ID 83201
Director	R. Dale Kruse	93 Cedar Hills Dr.	Pocatello ID 83201
5.		6.	
		Signature <u>Ronald B. Howell</u> Date <u>3-7-11-97</u>	
		Name (Typed or Printed) <u>Ronald B. Howell</u> Title <u>President</u>	

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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