

No. <b>C 186084</b>	<b>Due no later than Feb 28, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  ALL AMERICAN INSURANCE, INC. JAMES A FULLINWIDER 929 N MAIN ST MERIDIAN ID 83642		JAMES A FULLINWIDER 929 N MAIN ST MERIDIAN ID 83642			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JAMES A FULLINWIDER	929 N MAIN ST	MERIDIAN	ID	USA	83642
SECRETARY	STEPHANIE A. BARNES	929 N. MAIN STREET	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:  <b>ID</b> <b>C 186084</b>	6. Annual Report must be signed.* Signature: James Fullinwider Name (type or print): James Fullinwider		Date: 02/04/2013 Title: President			
Processed 02/04/2013		* Electronically provided signatures are accepted as original signatures.				