No. C 152349		Due no later than Dec 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		GREG KIMBE	GREG KIMBERLING			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed GREGORY L. KIMBERLING INSURANCE AGENCY, INC. GREG L KIMBERLING PO BOX 9312 MOSCOW ID 83843		1415 THATUNA ST MOSCOW ID 83843 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Bus	iness Addresses of I	President, Secretary, and Directors. Treasu	urer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT GREGORY	L KIMBERLING	PO BOX 9312	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: Gre		Date: 11/02/2017				
C 152349	Name (type or	r print): Greg Kimberling		Title: President			
Processed 11/02/2017	* Electronically pr	* Electronically provided signatures are accepted as original signatures.					