

No. <b>W 60586</b>		<b>Due no later than Mar 31, 2013</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>Annual Report Form</b>		MICHAEL N SMITH 280 W 2ND ST KETCHUM ID 83340			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		NEW WEST INSURANCE, L.L.C. JEN PO BOX 5859 KETCHUM ID 83340					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MICHAEL N SMITH	PO BOX 5859	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 60586</b>		Signature: Jen Johanningmeier			Date: 01/20/2013		
		Name (type or print): Jen Johanningmeier			Title: Licensing Manager		
Processed 01/20/2013		* Electronically provided signatures are accepted as original signatures.					