

No. **W 9385**

Due no later than July 31, 2006

## Annual Report Form

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

KRUSE INSURANCE OF IDAHO FALLS, LLC  
376 S FREEMAN  
IDAHO FALLS, ID 834012. Registered Agent and Office **NO PO BOX**DEL MCNARY  
376 S FREEMAN  
IDAHO FALLS, ID 83401**NO FILING FEE IF  
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	DELMER MCNARY	740 JOHN ADAMS PARKWAY	IDAHO FALLS	ID.	83401
SECRETARY	BRET HOWELL	755 N. MAIN	POCATELLO	ID.	83201
TREAS.	RONALD HOWELL	755 N. MAIN	POCATELLO	ID.	83201
MEMBER	BETSEY MCNARY	740 JOHN ADAMS PARKWAY	IDAHO FALLS	ID.	83401

5. Organized Under the Laws of:

IDAHO  
W 9385

6.

Signature

DELMER MCNARY

Date

5/8/06

Name (Typed or Printed)

DELMER MCNARY

Title

PRESIDENT

Issued 05/01/2006

Do Not Tape or Staple

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