No. c 96105	Annual Report Form Due No Later Than November 30.		2. Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct		CHAR MO 2229 w s	RIARITY TATE ST	May 20 - 8 - 10 - 10 - 10 - 10 - 10 - 10 - 10
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GREAT NORTHWEST INSURANCE AG CHAR MORIARITY 2229 W STATE ST		301SE	ID	83732
NO FEE REQUIRED			3. Organized Under the Laws of:		
* FIRST NOTICE *	BOISE	ID 83702	10	C 96	105
 Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) 					
Office held Name	Street or P.O. A	lddress	City	State	Zip.
President Stephen W. Doucette 2229 W. Stat Secretary Charlene Moriarity "			Boise "	ID	83702
Director Stephen W. Doucette			lT.	11	111
5. NATURE OF BUSINESS 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true correct and complete. Signature Signature Date 8/33/96					
INSURANCE	Name (Typed or A				
ISSUED: 37-06-19	996	•	1	8042	
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Annual Report Form