	Due no later than August 31, 2004	2. Registered Agent and Office NO PO BO
PO BOX 83720	Annual Report Form  1. Mailing Address - Correct in this box, if applicable	WILLIAM C SHAFFER
	WILLIAM SHAFFER INSURANCE AGENCY, I 2813 MASSACHUSETTS AVE NAMPA, ID 83686	2610 POLK ST CALDWELL, ID 83605
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
4. Corporations: Enter Na	ames and Business Addresses of President, Sec	cretary and Directors
Office held Name	Street or P.O. Address	<u>City State</u> <u>Zip</u>
Pres William C	Shatter 16440 Franklin Ave No	Ampa 1d 85687
5. Organized Under the Laws of:	6. Signature Wullam & Sha	The B-18-04
5. Organized Under the Laws of: IDAHO C 130270 Issued 06/01/2004	6. Signature William C Sha	The Date B-18-04  2ffor Title Pres