

No. 57621 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 1. Mailing Address: Please Correct If Not Correct ARCHIBALD-FELT AGENCY, INC. STEVEN C. ARCHIBALD BOX 759 BLACKFOOT ID 83221	2. Registered Agent and Office NOT A P.O. BOX STEVEN C ARCHIBALD 50 NORTH ASH, BOX 759 BLACKFOOT ID 83221 3. Incorporated Under The Laws of ID NO: 057621																				
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td colspan="4">RALPH M. ARCHIBALD, 532 DOUGLAS AVE, IDAHO FALLS, IDAHO 83401</td> </tr> <tr> <td>Secretary:</td> <td colspan="4">STEVEN C. ARCHIBALD, 1408 YORK DR., BLACKFOOT, IDAHO 83221</td> </tr> <tr> <td>Directors:</td> <td colspan="4">NONE</td> </tr> </tbody> </table>			Name	Street or P.O. Address	City	State	Zip	President:	RALPH M. ARCHIBALD, 532 DOUGLAS AVE, IDAHO FALLS, IDAHO 83401				Secretary:	STEVEN C. ARCHIBALD, 1408 YORK DR., BLACKFOOT, IDAHO 83221				Directors:	NONE			
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5. Nature of Business INSURANCE	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 <u>Steven C Archibald</u> Date <u>7-8-91</u> Name (Typed or Printed) <u>STEVEN C. ARCHIBALD</u> Title <u>SECRETARY</u>																					