

No. **W 1748**

**Due no later than Nov 30, 2001**  
**Annual Report Form**

2. Registered Agent and Office **NO PO BOX**

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

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

ANDERSON INSURANCE AGENCY LLC  
PATRICIA ANDERSON RECTOR  
823 MAIN

PATRICIA ANDERSON RECTOR  
823 MAIN

CALDWELL, ID 83605

CALDWELL, ID 83605

3. New Registered Agent Signature

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
member	PATRICIA Anderson Rector	5076 N. LANCER	Boise	ID	83713
member	JANET ANDERSON Neil	2603 S. Willowbrook	Caldwell	ID	83605
member	TRACY WARFIELD	3103 RAY Ave	Caldwell	ID	83605

5. Organized Under the Laws of:

IDAHO  
W 1748

6.

Signature

Name  
(Typed or  
Printed)

*Patti Rector*  
PATTI Rector

Date

Title

9/13/01

member / owner