

No. C 140962	Due no later than October 31, 2006 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MORGAN INSURANCE, INC. PO BOX 3052 TWIN FALLS, ID 83303	LYN MORGAN 904 BLUE LAKES BLVD TWIN FALLS, ID 83301 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>Lynette L Morgan</td> <td>PO Box 3052</td> <td>Twin Falls</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>VP/Sec/Treas</td> <td>Michael J Morgan</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	Lynette L Morgan	PO Box 3052	Twin Falls	Id	83301	VP/Sec/Treas	Michael J Morgan	" "	" "	" "	" "
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Pres	Lynette L Morgan	PO Box 3052	Twin Falls	Id	83301															
VP/Sec/Treas	Michael J Morgan	" "	" "	" "	" "															
5. Organized Under the Laws of: IDAHO C 140962	6. Signature <u>Lynette L Morgan</u> Date <u>10/19/06</u> Name <small>(Typed or Printed)</small> <u>Lynette L Morgan</u> Title <u>Pres.</u>																			

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