| No. <b>C 190358</b>  |                           | Due no later than Mar 31, 2012  |  | 2. Registered A                             | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|---------------------------|---|--|---|---|---------|-------------|--|
| Return to:   |                           | Annual Report Form  |  |   | GAIL A MITCHELL                             |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                           | 1. Mailing A  |  | 80 SHADOW MOUNTAIN RD<br>SANDPOINT ID 83864 |   |         |             |  |
|  |                           | G.A.M. INSURANCE, INC.<br>GAIL A MITCHELL<br>80 SHADOW MOUNTAIN RD        |  | SANDFOINT                                   |   |         |             |  |
|  |                           | SANDPOINT ID 83864  |  | 3. New Register                             | 3. <u>New</u> Registered Agent Signature:*  |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE  |                           | USA   |  |   |   |         |             |  |
| 4. Corporations: Enter Na  | mes and Busin             | ess Addresses of  | President, Secretary, and Directors. Treas | surer (optional).                           |   |         |             |  |
| Office Held  | Name                      |   | Street or PO Address                       | City  | State                                       | Country | Postal Code |  |
| SECRETARY  | SECRETARY MIKE L MITCHELL |   | 80 SHADOW MOUNTAIN                         | SANDPOINT                                   | ID  | USA     | 83864       |  |
| 5. Organized Under the Laws of:  |                           | 6. Annual Report must be signed.*   |  |   |   |         |             |  |
| ID   |                           | Signature: Gail a Mitchell  |  |   | Date: 02/26/2012                            |         |             |  |
| C 190358   |                           | Name (type o  |  | Title: President                            |   |         |             |  |
| Processed 02/26/2012   |                           | * Electronically provided signatures are accepted as original signatures. |  |   |   |         |             |  |