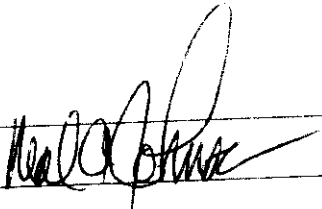


No. C 37581	Due no later than July 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX NEAL A. JOHNSON 163 JOHNSON AVE. OROFINO, ID 83544
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable WALRATH INSURANCE AGENCY, INC. NEAL A. JOHNSON P O BOX 788 OROFINO, ID 83544		3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
			<u>State</u>
			<u>Zip</u>
PRESIDENT	NEAL A JOHNSON	PO BOX 788	OROFINO ID 83544
SECRETARY	JEANNIE JOHNSON	PO BOX 788	OROFINO ID 83544
DIRECTOR	BRIAN JOHNSON	2698 GRANGEMONT RD	OROFINO ID 83544
DIRECTOR	TRACY TUCKER	6750 BARNEY LANE	MERIDIAN ID 83642
5. Organized Under the Laws of: IDAHO C 37581		6. Signature  Date <u>June 1, 2005</u> Name (typed or printed) <u>NEAL A. JOHNSON</u> Title <u>PRESIDENT</u>	

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