

No. **W 15388**

Due no later than May 31, 2006

Annual Report Form

Return to:

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

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

~~CUMMINGS AGENCY-FARMERS INSURANCE G~~
~~504 CREEKSIDE CT~~ 613 N Midland Blvd.
~~NAMPA, ID 83686~~ Nampa, ID 836512. Registered Agent and Office **NO PO BOX**JAMES CUMMINGS
~~504 CREEKSIDE CT~~
~~NAMPA, ID 83686~~
613 N Midland Blvd
Nampa, ID 836513. New Registered Agent Signature**NO FILING FEE IF
RECEIVED BY DUE DATE**

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

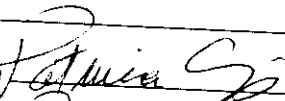
| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-------------------|-------------------------------|-------------|--------------|------------|
| Managing Partner | James Cummings | 613 N Midland Blvd | Nampa | ID | 83651 |
| Managing Partner | Patricia Cummings | 613 N Midland Blvd | Nampa | ID | 83651 |

5. Organized Under the Laws of:

IDAHO
W 15388

6.

Signature



Date

5-11-06

Name

(Typed or Printed)

PATRICIA Cummings

Title

Managing Partner

Issued 03/01/2006

Do Not Tape or Staple

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