

No. C 138905		Due no later than May 31, 2010 Annual Report Form		2. Registered Agent and Address (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 needed. NATIVE FIRST INSURANCE INC. JULIE PERCY PO BOX 69 BLACKFOOT ID 83221 USA		JAMES C PERCY JR 144 W BRIDGE ST BLACKFOOT ID 83221			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	JULIE K PERCY	P.O. BOX 69 144 W. BRIDGE	BLACKFOOT	ID	USA	83221	
PRESIDENT	CRAIG LAMERE	P.O. BOX 69 144 W. BRIDGE	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of: ID C 138905		6. Annual Report must be signed.* Signature: Julie Percy Name (type or print): Julie Percy					
Processed 03/12/2010		Date: 03/12/2010 Title: Treasurer * Electronically provided signatures are accepted as original signatures.					