No. W 71878		Due no later than Feb 29, 2012			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CHRIS STEVENSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WESTPORT INSURANCE ADVISORS, LLC CHRIS STEVENSON PO BOX 5694 TWIN FALLS ID 83303			1162 EASTLAND DRIVE NORTH TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held	Name		Street or PO Address	Cit	ty	State	Country	Postal Code
MEMBER CHRIS STEVENSO		'ENSON	PO BOX 5694	TV	VIN FALLS	ID	USA	83303
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 71878		Signature: Chris Stevenson			Date: 02/14/2012			
		Name (type or print): Chris Stevenson			Title: President			
Processed 02/14/2012 * Electronically provided signatures are accepted as original signatures.								