INSTRUCTIONS ON REVERSE SIDE

No. 50620

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1993

ISSUED: 07-11-1993

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address [illegible]

ALPINE INSURANCE AGENCY, INC.
RONALD C. HIX
PO BOX 1764

IDAHO FALLS ID 83403

2. Registered Agent and Office **NOT A P.O. BOX**

RONALD C. HIX
2252 ROSS AVE.

IDAHO FALLS ID 83402 (corrected by hand to 83406)

3. Incorporated Under The Laws of ID

NO: 50620

4. Names and Addresses of Officers and Directors **MUST BE PRINTED OR TYPED**

	Name	Street or P.O. Address	City	State	Zip
President:	Ronald C. Hix	2252 Ross Avenue,	Idaho Falls,	Idaho	83406
Secretary:					
Directors:	Nita K. Hix	2252 Ross Avenue,	Idaho Falls,	Idaho	83406

5. Nature of Business

Insurance Sales

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature: Ronald C Hix Date: 7-9-93

Name (Typed or Printed): Ronald C. Hix Title: Owner