

INSTRUCTIONS ON REVERSE SIDE

ISSUED 07-04-1992

No. 98265

Idaho Corporation Annual Report Form

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

Return To

Due No Later Than November 30, 1995

LEWIS A LENKER
136 4TH AVE EASTSecretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

1. Mailing Address - Please Correct if Not Correct

WHITE INSURANCE AGENCY, INC.

TWIN FALLS ID 83301

* FIRST NOTICE *
NO FEE REQUIRED

PO BOX 845

TWIN FALLS ID 83301

3. Incorporated Under The Laws of

ID

NO: 98265

4. Names and Addresses of Officers and Directors

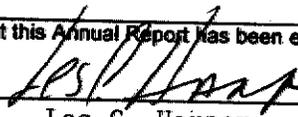
	Name	Street or P.O. Address	City	State	Postal Code
President:	Jerry D. Holman	Box 845	Twin Falls	Idaho	83303
Secretary:	Les C. Harper	Box 845	Twin Falls	Idaho	83303
Directors:	Lewis A. Lenker	Box 845	Twin Falls	Idaho	83303

5. Nature of Business

Insurance

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



Date 07/12/1995

Name (Typed or Printed)

Les C. Harper

Title Secretary