

No. C 24966	Due no later than Apr 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX RONALD B. HOWELL 755 NORTH MAIN, SUITE E POCATELLO, ID 83204																		
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 applicable KRUSE INSURANCE, INC. RONALD B. HOWELL P. O. BOX 489 POCATELLO, ID 83204 0484	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Ronald B. Howell</td> <td>P.O. Box 489</td> <td>Pocatello</td> <td>ID</td> <td>83204-0489</td> </tr> <tr> <td>Secy/Treas</td> <td>Bret A. Howell</td> <td>P.O. Box 489</td> <td>Pocatello</td> <td>ID</td> <td>83204-0489</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Ronald B. Howell	P.O. Box 489	Pocatello	ID	83204-0489	Secy/Treas	Bret A. Howell	P.O. Box 489	Pocatello	ID	83204-0489
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5. Organized Under the Laws of: IDAHO C 24966	6. Signature <u>Ronald B. Howell</u> Date <u>02-07-03</u> Name <small>(Typed or Printed)</small> <u>Ronald B. Howell</u> Title <u>President</u>																			