

INSTRUCTIONS ON REVERSE SIDE

No. 96105	Idaho Corporation Annual Report Form Due No Later Than November 30, 1995	2. Registered Agent and Office NOT A P.O. BOX CHAR MORIARITY 1101 WEST RIVER STREET 2229 W. State Street BOISE ID 83702
Return To Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address -- Please Correct If Not Correct GREAT NORTHWEST INSURANCE AGENC CHAR MORIARITY 1101 WEST RIVER STREET 2229 W. State Street BOISE ID 83702	3. Incorporated Under The Laws of ID NO: 96105

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Postal Code</u>
President:	Stephen W. Doucette	2229 W. State St.	Boise	ID	83702
Secretary:	Charlene Moriarity	2229 W. State St.	Boise	ID	83702
Directors:	Stephen W. Doucette	2229 W. State St.	Boise	ID	83702

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 _____ Name (Typed or Printed) <u>Charlene Moriarity</u> Title <u>Secretary</u>
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