

No. C 164141	Due no later than Dec 31, 2014 Annual Report Form	2. Registered Agent and Address (NO PO BOX)
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 needed. GRANT MOSES INSURANCE, INC. GRANT R MOSES 1054 W 1600 S PRESTON ID 83263	GRANT R MOSES 1054 W 1600 S PRESTON 83263
		3. <u>New</u> Registered Agent Signature:*
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		
Office Held	Name	Street or PO Address
PRESIDENT	GRANT R MOSES	1054 WEST 1600 SOUTH
City	State	Country
PRESTON	ID	USA
Postal Code	83263	
5. Organized Under the Laws of: ID C 164141	6. Annual Report must be signed.* Signature: grant moses Name (type or print): grant moses Date: 10/15/2014 Title: president	
Processed 10/15/2014 * Electronically provided signatures are accepted as original signatures.		