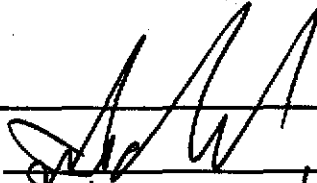


No. C 108701	Due no later than December 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable VALLEY STATE INSURANCE, INC. PETER D MCDONALD 2600 ROSE HILL STE 101 BOISE, ID 83705	PETER D MCDONALD 2600 ROSEHILL STE 101 BOISE, ID 83705 3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Pete McDonald	2600 Rose Hill Suite 101	Boise	ID	83705
Dir	Tim Black	" "			
Dir	Craig Casperson	" "			
Dir	Debbie Hetherington	" "			
Dir	Tracy Hawke	" "			

5. Organized Under the Laws of: IDAHO C 108701	6. Signature  Name (Typed or Printed) <u>Pete McDonald</u> Date <u>12/29/08</u> Title <u>Pres</u>
-------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Issued 10/01/2008

Do Not Tape or Staple

200812001579