

No. <b>C 164141</b>	<b>Due no later than December 31, 2008</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>
Return to: <b>SECRETARY OF STATE</b> <b>450 NORTH FOURTH STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF</b> <b>RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable	GRANT R MOSES 1054 W 1600 S PRESTON, ID 83263  3. <u>New</u> Registered Agent Signature
	GRANT MOSES INSURANCE, INC. 1054 W 1600 S PRESTON, ID 83263	

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres	Grant Moses	1054 W 1600 S	Preston	Id	83263
Sec	Pattie Moses	1054 W 1600 S	Preston	Id	83263

5. Organized Under the Laws of:  <b>IDAHO</b> <b>C 164141</b>	6. Signature <u>Grant Moses</u> Date <u>12-8-08</u> Name (Typed or Printed) <u>Grant Moses</u> Title <u>Pres.</u>
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