




| No. | Idaho Corporation Annual Report Form Due No Later Than November 1, 1992 | | 2. Registered Agent and Office NOT A P.O. BOX ROBERT J. RICKETTS 1705 NORTH COLE ROAD | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|--------------|--|----------------------|---|------------------------|--------------|------------|------------|--------------------|------------------|-------|-------|-------|------------|--|--|--|--|--|------------|--|--|--|--|--|
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED | 1 Mailing Address — Please Correct, If Not Correct | | BOISE ID 83704 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | RICKETTS AND ASSOCIATES, INC. ROBERT J. RICKETTS 1705 NORTH COLE ROAD BOISE ID 83704 0000 | | 3. Incorporated Under The Laws of ID NO: 64950 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Names and Addresses of Officers and Directors | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Robert J. Ricketts</td> <td>1705 N. Cole Rd.</td> <td>Boise</td> <td>Idaho</td> <td>83704</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | Robert J. Ricketts | 1705 N. Cole Rd. | Boise | Idaho | 83704 | Secretary: | | | | | | Directors: | | | | | |
| | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | | |
| President: | Robert J. Ricketts | 1705 N. Cole Rd. | Boise | Idaho | 83704 | | | | | | | | | | | | | | | | | | | | | | | |
| Secretary: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Directors: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business Insurance Agency | | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature </td> <td>Date 07-16-92</td> </tr> <tr> <td>Name (Typed or Printed) Robert J. Ricketts</td> <td>Title President</td> </tr> </table> | | | Signature  | Date 07-16-92 | Name (Typed or Printed) Robert J. Ricketts | Title President | | | | | | | | | | | | | | | | | | | | |
| Signature  | Date 07-16-92 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (Typed or Printed) Robert J. Ricketts | Title President | | | | | | | | | | | | | | | | | | | | | | | | | | | |