, ,	INSTRUC	TIONS ON REVERSE, SIDE	<u> </u>	MED . 07-	11-100 Y	
No. 30499  Return To	Idaho Corporation Annual Report Form  Due No Later Than November 1,  1 Mailing Address.  MARTIN INSURANCE, INCORPORATED  LEE W. MARTIN  P. 0. BOX 699		2. Registered Agent and Office NOT A P.O. BOX  LEE W. MARTIN  11.22 IDAHO STREET  LEWISTON ID 83501  3. Incorporated Under The Laws  of ID			
Secretary of State Room 203, Statehouse Boise, ID 83720  * FIRST NOTICE *						
NO FEE REQUIRED	LEWISTON	ID 83501	NO:	30499		
4. Names and Addresses of Officer	s and Directors	MUST BE PRINTED C	A TYPE	5	4/	
	<u>Name</u>	Street or P.O. Address		City	State Zip	
President: Lee W. Martin Secretary: Michael L. Ma: Directors: None		366 Reservoir Driv 4051 Par Court,		Lewiston, Lewiston,	ID 83501 ID 83501	
5. Nature of Business	6. I certify the	at his Anriual Report has been exer	flined by me	and is to the b	est of my knowledge	
Insurance Agency	Signature			Date 7/9/93		
	Name Call or	Name Amen Michael L. Martin		Title Secretary-Treasurer		