No. <b>C 59380</b>		Due no later than Sep 30, 2015	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  HOMESTEAD INSURANCE, INC.  PAUL M KNISS  258 NO WATER AVE STE 1  IDAHO FALLS ID 83402-4096	PAUL M KNISS 258 NO WATER AVE STE 1 IDAHO FALLS ID 83402-4096  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			N			
	ies and Busin Name	ess Addresses of President, Secretary, and Directors. Treasurer ( Street or PO Address	Optional). City	State	Country	Postal Code
SECRETARY	GREG J CHA PAUL M KNI	PIN 258 N WATER AVE STE 1	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83402 83402
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Paul M Kniss	Date: 09/22/2015			
C 59380		Name (type or print): Paul M Kniss	Title: President			
Processed 09/22/2015 * Electronically provided signatures are accepted as original signatures.						