4 14 VA	<u> </u>	INSTRUCTIONS ON REVERSE SIDE	** <b>ISS</b> UED: "U/-	ช=าบบชไไ	1 6-9	
lo. 51587		o Corporation Annual Report Form	2. Registered Agent and	Office NOT A	P.O. BOX	
Return To	Due	No Later Than November 1,	WILLIAM A KIN			
Secretary of Stat	1 Mailing A	Address - Ph. n. Corner, II Wed Corre	TUUS NORTH TH	1005 NORTH THIPD		
Room 203, State Boise, ID 83720	house   WILLI	AM A. KIRK AGENCY, INC. AM A. KIRK	MCCALL		3438	
	BOX "		3. Incorporated Under The Laws			
* FIRST NOTION NO FEE REQUIREMENT		L ID 83638	of ID NO: 51587			
Names and Addresses	of Officers and Directo	rs MUST BE PRINTED	OR TYPED	. —		
	Name	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
	VILLIAM A. KIRK VILLA H. KIRK	P O BOX M	MCCALL	IDAHO 8	3638	
Directors: W	VILLEAMRESIDENKI	RK P O BOX M	11	**	11	
Nature of Business	16	Loodle, that this America Dance is				
THE COLUMN TO SERVICE	ľ	. I certify that this Armual Report has been true, correct and amplete	examined by me and is to the t	Dest of my know	ledge	
INSURANCE	AGENCY	Signature All All All All All All All All All Al	Date /	0/6/93	· ·	
		Name (Typed or WILLIAM A. KIRK	Title PRE	SIDENT		