

No. W 19315

Due no later than May 31, 2008

## Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

TREASURE VALLEY HEALTH INSURANCE, L  
917 2ND ST S  
NAMPA, ID 83651

GARY D CASE  
2241 S PREAKNESS WAY  
NAMPA, ID 83686

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner	Verlynn Nobbs	917 2nd St S	Nampa	ID	83651
owner	William W Deal, Jr	917 2nd St S	Nampa	ID	83651
Owner, Mgt	Gary D Case	917 2nd St S.	Nampa	ID	83651

5. Organized Under the Laws of:

IDAHO  
W 19315

6.

Signature

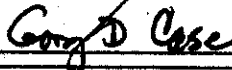


Date

3/14/08

Name

(Typed or Printed)



Title

owner

Issued 03/03/2008

Do Not Tape or Staple

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