

No. **C 158056**

Due no later than December 31, 2005

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 applicable

JACKMAN INSURANCE AGENCY, INC.
678 W BRIDGE ST
BLACKFOOT, ID 832212. Registered Agent and Office **NO PO BOX**JOHN BRANDON JACKMAN
678 W BRIDGE ST
BLACKFOOT, ID 83221**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

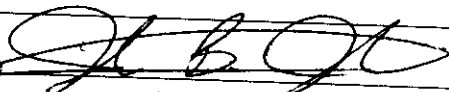
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	JOHN BRANDON JACKMAN	P.O. Box 42	BLACKFOOT	ID	83221

5. Organized Under the Laws of:

IDAHO
C 158056

6.

Signature



Date 10-14-2005

Name (Typed or Printed)

JOHN BRANDON JACKMAN

Title

PRESIDENT

Issued 10/03/2005

Do Not Tape or Staple

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