| No. C 56589 | No. C 56589 Due no later than Oct 31, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|---|---|---|---|---------------------|---------|-------------|--|
| Return to: | | Annual Report Form | | WILLIAM EIMERS, JR. | | | |
| 700 WEST JEFFERSON WILLIAM EI | | Address: Correct in this box if needed. ERS, JR., AGENCY, INC. ILLIAM EIMERS,JR | 222 S 6TH STREET ST. MARIES ID 83861 | | | | |
| | ST. MARIES ID 83861-0520 | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | USA | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY KAREN B | EIMERS | 222 S. 6TH ST P O BOX 520 | ST MARIES | ID | USA | 83861-0520 | |
| PRESIDENT WILLIAM EIMERS JR. | | 222 S. 6TH ST P O BOX 520 | ST MARIES | ID | USA | 83861-0520 | |
| 5. Organized Under the Laws of: 6. Annual Repo | | rt must be signed.* | | | | | |
| ID | Signature: Ka | Signature: Karen B Eimers | | Date: 08/18/2014 | | | |
| C 56589 | Name (type o | | Title: Secretary | | | | |
| Processed 08/18/2014 | * Electronically provided signatures are accepted as original signatures. | | | | | | |