No. <b>C 195925</b>		Due no later than Sep 30, 2017 2. Registered Agent and Address (NO PO BC					
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.  5B PAWS N CLAWS INC KATE NIXON PO BOX 4066 HAILEY ID 83333	616 S MAIN HAILEY ID	KATIE NIXON 616 S MAIN ST HAILEY ID 83333  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		ess Addresses of President, Secretary, and Directors. Treasurer	(ontional)				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT KATE NIXON		PO BOX 4066	HAILEY	ID	USA	83333	
5. Organized Under the Laws of:  ID C 195925		6. Annual Report must be signed.* Signature: Kate Nixon Name (type or print): Kate Nixon	Date: 10/23/2017 Title: President				
Processed 10/23/2017	* Electronically provided signatures are accepted as original signatures.						