No. C 126686		Due no later than Dec 31, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. MORRISON CPAS, P.A. DEBBIE M EDMISTON 336 N FREDERICK ST		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				336 N FREDE POST FALLS	DEBBIE M EDMISTON 336 N FREDERICK ST POST FALLS ID 83854-9595			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		POST FALLS ID 83854-9595 3. New Registered Agent Signature:* ness Addresses of President, Secretary, and Directors. Treasurer (optional).		ignature:*				
	Name		Street or PO Address	City	State	Country	Postal Code	
to the second control of the second control	DEBBIE M EDMISTON SHERRY J MORRISON		336 N FREDERICK ST 336 N FREDERICK ST	POST FALLS POST FALLS	ID ID	USA USA	83854-9595 83854-9595	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Debbie M. Edmiston Date: 10/15/2012						
C 126686		Name (type o		Title: Secretary				
Processed 10/15/2012	rocessed 10/15/2012 * Electronically provided signatures are accepted as original signatures.							