

No. C 190139		Due no later than Feb 28, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. STREAMSIDE ALZ INC. WILLIAM J HINES 3886 W HOUSELAND CT EAGLE ID 83616		WILLIAM J HINES 3886 W HOUSELAND CT EAGLE ID 83616			
						3. <u>New</u> Registered Agent Signature:*	
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	
PRESIDENT	WILLIAM J HINES	3886 W. HOUSELAND CT	EAGLE	ID	USA	83616	
SECRETARY	NANCY M HINES	3886 W. HOUSELAND CT	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID C 190139		6. Annual Report must be signed.* Signature: Nancy M. Hines Name (type or print): Nancy M. Hines					
		Date: 02/20/2018 Title: Secretary					
Processed 02/20/2018		* Electronically provided signatures are accepted as original signatures.					