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| No. C 177132 | | Due no later than Feb 28, 2015 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. VALET VACATION RENTALS & PROPERTY MANAGEMENT INC. CYNDI BONETTI 75 ARLING CENTER COURT PO BOX 600 TAMARACK ID 83615 USA | | CYNDI BONETTI 75 ARLING CENTER COURT TAMARACK 83615 | | | |
| | | | | 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 | |
| SECRETARY | ELLIE ALTOMARE | 5089 SAN SIMEON DR | SANTA BARBARA | CA | USA | 93111 | |
| DIRECTOR | CHRIS KIRK | 372 DISCOVERY | TAMARACK | ID | USA | 83615 | |
| PRESIDENT | CYNDI BONETTI | 372 DISCOVERY | TAMARACK | ID | USA | 83615 | |
| 5. Organized Under the Laws of: ID C 177132 | | 6. Annual Report must be signed.* Signature: Cyndi Bonetti Name (type or print): Cyndi Bonetti Date: 12/16/2014 Title: President | | | | | |
| Processed 12/16/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |