| No. C 202847 | | Due no later than Jul 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|--|----------|--|----------|---------|----------------|
| 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 HIGH DESERT TOOLS INC. PO BOX 306 ONTARIO OR 97914 | | JOHN BLOM 4611 NW 1ST AVE NEW PLYMOUTH ID 83655 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. Trea | asurer (| ontional) | | | |
| | Name | Street or PO Address | asarci (| City | State | Country | Postal Code |
| | CLINTON L SUSAN J TR | | | ONTARIO ONTARIO | OR OR | | 97914 97914 |
| 5. Organized Under the Laws of: OR C 202847 | | 6. Annual Report must be signed.* Signature: Clinton L Traw Name (type or print): Clinton L Traw | | Date: 06/11/2016 Title: President | | | |
| Processed 06/11/2016 | * Electronically provided signatures are accepted as original signatures. | | | | | | |