No. <b>C 24669</b>		Due no later than Nov 30, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	1 Mailine	Annual Report Form  1. Mailing Address: Correct in this box if needed.  JOSLYN & MORRIS, INC.  RONALD K MORRIS  PO BOX 7007  BOISE ID 83707-1007		STANLEY J THARP 300 N 6TH ST BOISE ID 83701  3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	JOSLYN & I RONALD K PO BOX 70						
NO FILING FEE IF RECEIVED BY DUE DATI	<b>.</b>						
4. Corporations: Enter Names a	nd Business Addresses	of President, Secretary, and Directors. Trea	surer (optional).				
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
	ENCE J FLUME ALD K MORRIS	1647 FEDERAL WAY 1647 FEDERAL WAY	BOISE BOISE	ID ID	USA USA	83705 83705	
C. Ouraniza d Under the Larry	: C Arroyal Bay						
5. Organized Under the Laws of		6. Annual Report must be signed.*					
ID	Signature:	Jill Snead		Date: 10/24/2013			
C 24669	Name (type	Name (type or print): Jill Snead		Title: Bookkeeper			
Processed 10/24/2013	* Electronicall	* Electronically provided signatures are accepted as original signatures.					