No. **C 192470**	**Due no later than Oct 31, 2016** **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.** WDE, INC. TINA MADDEN 315 LAKE ST JACKSON TN 38301	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New 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	LARRY B REID	315 LAKE ST	JACKSON	TN	USA	38301
SECRETARY	JOHN CAMPBELL	315 LAKE ST	JACKSON	TN	USA	38301

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
TN **C 192470**	Signature: Tina Madden	Date: 08/30/2016
	Name (type or print): Tina Madden	Title: Office Manager

Processed 08/30/2016

* Electronically provided signatures are accepted as original signatures.