

No. C 47569		Due no later than Jun 30, 2012		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. LEMHI TITLE AND ABSTRACT COMPANY, INC. M CHACE SLAVIN PO BOX J SALMON ID 83467 USA		M CHACE SLAVIN 401 MAIN ST STE 2 SALMON ID 83467			
				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	M CHACE SLAVIN	PO BOX J	SALMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 47569		Signature: M. Chace Slavin				Date: 04/16/2012	
		Name (type or print): M. Chace Slavin				Title: President	
Processed 04/16/2012		* Electronically provided signatures are accepted as original signatures.					