| No. C 184486 | Due no later than Sep 30, 2016 | | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|--|------------|---|-------|---------|-------------|
| Return to: | Annual Report Form 1. Mailing Address: Correct in this box if needed. ALPINE EXTERIORS INC ROBERT L TIBBS II PO BOX 2171 POCATELLO ID 83206 | | | ROBERT L TIBBS II 110 E 16TH MCCAMMON ID 83250 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Corporations: Enter Names and Busin | ness Addresses of Pr | esident, Secretary, and Directors. Tre | easurer (d | optional). | | | |
| Office Held Name | | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT ROBERT LC | WELL TIBBSII | PO BOX 2171 | | POCATELLO | ID | USA | 83206 |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | | | | | | |
| ID | Signature: Robert Tibbs | | | Date: 12/01/2016 | | | |
| C 184486 | Name (type or print): Robert Tibbs | | | Title: Owner | | | |
| Processed 12/01/2016 | * Electronically provided signatures are accepted as original signatures. | | | | | | |