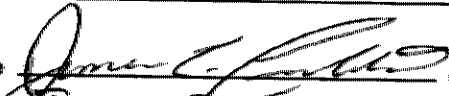


No. C 53741	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct CRUMBLISS BROTHERS, INC. JAMES CRUMBLISS 2785 SAGEBRUSH DR. TWIN FALLS ID 83301		JAMES CRUMBLISS 2785 SAGEBRUSH DR. TWIN FALLS ID 83301 3. Organized Under the Laws of: ID C 53741																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Crumbliss</td> <td>2785 Sagebrush Dr.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td></td> <td>James Crumbliss</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	Crumbliss	2785 Sagebrush Dr.	TWIN FALLS	ID	83301		James Crumbliss				
Office held	Name	Street or P.O. Address	City	State	Zip																	
PRESIDENT	Crumbliss	2785 Sagebrush Dr.	TWIN FALLS	ID	83301																	
	James Crumbliss																					
5. Signature of New Registered Agent		6. Signature  Date 7-12-99 Name (Typed or Printed) James Crumbliss Title PRESIDENT																				

ISSUED: 07-03-1999

3262