

No. C 76422		Due no later than Jul 31, 2017		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. JOHN F. PORTER, P.A. JOHN F. PORTER P. O. BOX 459 TROY ID 83871-0459 USA		JOHN F. PORTER 511 SOUTH MAIN STREET TROY ID 83871		
				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	JOHN F PORTER	PO BOX 459	TROY	ID	USA	83871-0459
SECRETARY	EVELYN S PORTER	PO BOX 459	TROY	ID	USA	83871-0459
DIRECTOR	JOHN F PORTER	PO BOX 459	TROY	ID	USA	83871-0459
5. Organized Under the Laws of: ID C 76422		6. Annual Report must be signed.* Signature: John F. Porter Name (type or print): John F. Porter Date: 05/17/2017 Title: President				
Processed 05/17/2017		* Electronically provided signatures are accepted as original signatures.				