

|                                                                                                                                                        |                   |                                                                                                                                                                       |        |                                                      |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------------------------------------------------------|---------|-------------|--|
| No. <b>C 66291</b>                                                                                                                                     |                   | <b>Due no later than Apr 30, 2017</b>                                                                                                                                 |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>   |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br>MOSCOW & PULLMAN BUILDING SUPPLY, INC.<br>PAT GARRETT<br>760 N MAIN ST<br>PO BOX 9068<br>MOSCOW ID 83843 |        | PAT GARRETT<br>760 N. MAIN STREET<br>MOSCOW ID 83843 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                       |        | 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 |  |
| SECRETARY                                                                                                                                              | GERRI GARRETT     | 806 PHEASANT LANE                                                                                                                                                     | MOSCOW | ID                                                   | USA     | 83843       |  |
| PRESIDENT                                                                                                                                              | PATRICK O GARRETT | 806 PHEASANT LANE                                                                                                                                                     | MOSCOW | ID                                                   | USA     | 83843       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>C 66291</b>                                                                                               |                   | 6. Annual Report must be signed.*<br>Signature: Paula Ockerberg<br>Name (type or print): Paula Ockerberg<br>Date: 02/20/2017<br>Title: CFO                            |        |                                                      |         |             |  |
| Processed 02/20/2017                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                             |        |                                                      |         |             |  |