No. <b>C 72227</b>	Due no later than Mar 31, 2018	2. Registered Agent and Address (NO PO BOX)
Return to:	Annual Report Form	LEONARD SCHULTE
SECRETARY OF STATE	1. Mailing Address: Correct in this box if	if needed. 6913 SOUTH MAIN STREET
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LEONARD S. SCHULTE, C.P.A., CHARTERED LEONARD S. SCHULTE P. O. BOX 266 BONNERS FERRY ID 83805-0266	BONNERS FERRY ID 83805  3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Corporations: Enter Names and Busine	ess Addresses of President, Secretary, and Directo	tors. Treasurer (optional).
Office Held Name	Street or PO Address	City State Country Postal Code
DIRECTOR LEONARD S	SCHULTE PO BOX 266	BONNERS FERRY ID USA 83805
SECRETARY LEATHA P L		BONNERS FERRY ID USA 83805
PRESIDENT LEONARD S	SCHULTE PO BOX 266	BONNERS FERRY ID USA 83805-0266
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: LEONARD SCHULTE	Date: 03/20/2018
C 72227	Name (type or print): LEONARD SCHULTE	Title: PRESIDENT
Processed 03/20/2018 * Electronically provided signatures are accepted as original signatures.		