

No. C 186025	Due no later than Jan 31, 2017 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. TEAM WALLACE, INC. PO BOX 412 SILVERTON ID 83867	MARCY HAYMAN 104 WINDRIVER RD SILVERTON ID 83867	
		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
DIRECTOR	GARY FULLER	103 3RD ST	WALLACE ID USA 83873
DIRECTOR	KAREN MOONEY	115 W YELLOWSTONE BOX 272	SILVERTON ID USA 83867
5. Organized Under the Laws of: ID C 186025	6. Annual Report must be signed.* Signature: Karen Mooney Date: 12/02/2016 Name (type or print): Karen Mooney Title: Director		
Processed 12/02/2016		* Electronically provided signatures are accepted as original signatures.	