No. C 51513		Due no later than Jun 30, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES R HEPWORTH 1709 9TH ST LEWISTON ID 83501 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CONFLUENCE PRESS, INC. LINDA VACURA 608 BUS HWY 95 WINCHESTER ID 83555		NAME OF THE OWNER OWNER OWNER OF THE OWNER OWNE				
				5. <u>New</u> Register				
RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held N	ame		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR TANYA GONZ		ZALES	1709 9TH STREET	LEWISTON	ID	USA	83501	
SECRETARY LINDA R. VA		ACURA	608 BUS. HWY 95	WINCHESTER	ID	USA	83555	
PRESIDENT JA	JAMES R. HEPWORTH		1709 9TH STREET	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 51513		Signature: Linda R. Vacura			Date: 04/24/2016			
		Name (type or p		Title: Bookkeeper				
Processed 04/24/2016	* Electronically provided signatures are accepted as original signatures.							