No. C 163204	ı	Due no later than Oct 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		RUTH PIERCE			
SECRETARY OF STATE	1. Mailing	Address: Correct in this box if needed		320 MAIN AVE N TWIN FALLS ID 83301			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	REBECCA V PO BOX 929	BUSINESS PLUS, INC. REBECCA WILDMAN PO BOX 229					
	TWIN FALLS	5 ID 83303-0929	3. <u>New</u> Registere	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Addresses o	of President, Secretary, and Directors. Treas	surer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT CON PAULOS		PO BOX 929	TWIN FALLS	ID	USA	83303-0929	
	CCA WILDMAN	PO BOX 929	TWIN FALLS	ID	USA	83303-0929	
SECRETARY CINDY	COLLINS	PO BOX 929	TWIN FALLS	ID	USA	83303-0929	
5. Organized Under the Laws of: 6. Annual		ort must be signed.*					
ID	Signature: I	Signature: Rebecca Wildman Date: 08/22/2018					
C 163204	Name (type	or print): Rebecca Wildman	Title	Title: Executive Director			
Processed 08/22/2018 * Electronically provided signatures are accepted as original signatures.							