No. **C 190139**	**Due no later than Feb 29, 2016**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** STREAMSIDE ALZ INC. WILLIAM J HINES 3886 W HOUSELAND CT EAGLE ID 83616	WILLIAM J HINES 3886 W HOUSELAND CT EAGLE ID 83616 3. New 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
PRESIDENT	WILLIAM J HINES	3886 W. HOUSELAND CT	EAGLE	ID	USA	83616
SECRETARY	NANCY M HINES	3886 W. HOUSELAND CT	EAGLE	ID	USA	83616

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 190139**	Signature: Nancy M. Hines Name (type or print): Nancy M. Hines	Date: 01/20/2016 Title: Secretary

Processed 01/20/2016

* Electronically provided signatures are accepted as original signatures.