No. **C 211460**	**Due no later than Oct 31, 2018**	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.** SHEEPDOG OUTDOOR ADVENTURE RECOVERY INC. SHAWN DANIEL WILLIAMS 234 N MAIN ST MALAD ID 83252	UNITED STATES CORPORATION AGEN 800 W MAIN ST STE 1460 BOISE ID 83702 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	SHAWN DANIEL WILLIAMS	234 N MAIN ST	MALAD	ID		83252
DIRECTOR	BRADLEY DANIEL TILLOTSON	234 N MAIN ST	MALAD	ID		83252
DIRECTOR	BROOK B BLAISDELL	234 N MAIN ST	MALAD	ID		83252

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 211460**	Signature: Shawn Williams	Date: 12/15/2017
	Name (type or print): Shawn Williams	Title: President

Processed 12/15/2017

* Electronically provided signatures are accepted as original signatures.