

| No. C 134143 | | Due no later than 5/31/2009 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | |
|---|----------------|--|--------------|---|-------|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. | | SCOTT N BRAUN 7650 HWY 95 N 356 W AQUA AVE COEUR D'ALENE ID 83815 358 | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | BSN CORPORATION SCOTT N BRAUN 7650 HWY 95 N 356 W AQUA AVE COEUR D'ALENE ID 83815 | | 3. New Registered Agent Signature: | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Zip |
| President | Scott N. BRAUN | 356 W. AQUA Ave | Coeurd'Alene | Idaho | 83815 |
| Secretary | Scott N. BRAUN | 356 W. AQUA Ave | Coeurd'Alene | Idaho | 83815 |
| Director | Scott N. BRAUN | 356 W. AQUA Ave | Coeurd'Alene | Idaho | 83815 |
| 5. Organized Under the Laws of: ID C 134143 | | 6. Annual Report must be signed. Signature: <u>Scott N. Braun Pres.</u> Date: <u>5/26/09</u> Name(type or print): <u>Scott N. BRAUN, President</u> Title: <u>President</u> | | | |

Issued 3/16/2009 by NLB

200905002416