

No. C 147148	Due no later than January 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX CAROL COLEMAN 1217 MAPLE AVE 34175 Main Ave. COEUR D'ALENE, ID 83814 Bayview, ID 83803												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BAYVIEW MERCANTILE, INC. CAROL COLEMAN PO BOX 505 BAYVIEW, ID 83803		3. New Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>All</td> <td>Carol Coleman</td> <td>PO Box 505</td> <td>Bayview</td> <td>ID</td> <td>83803</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	All	Carol Coleman	PO Box 505	Bayview	ID	83803
Office held	Name	Street or P.O. Address	City	State	Zip										
All	Carol Coleman	PO Box 505	Bayview	ID	83803										
5. Organized Under the Laws of: IDAHO C 147148		6. Signature <u>Carol Col</u> Date <u>1/28/07</u> Name (Typed or Printed) <u>Carol Coleman</u> Title <u>owner</u>													