| No. C 93947 | | Due no later than Dec 31, 2014 | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--|---|--|--|---|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. WALLACE OASIS, INC. H. JAMES MAGNUSON PO BOX 469 WALLACE ID 83873 | | H. JAMES MAI 1250 NORTHW COEUR D'ALENI | H. JAMES MAGNUSON 1250 NORTHWOOD CENTER COURT #A COEUR D'ALENE 83814 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine | | | | | | | | |
| Office Held | Name | css Addi Csscs of T | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT SECRETARY DIRECTOR | H JAMES MAGNUSON DENNIS O'BRIEN H JAMES MAGNUSON | | PO BOX 2288 PO BOX 146 PO BOX 2288 | COEUR D'ALENE WALLACE COEUR D'ALENE | ID ID ID | USA USA USA | 83816 83873 83816 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 93947 | | Signature: Dennis O'Brien Name (type or print): Dennis O'Brien | | | Date: 10/17/2014 Title: Secretary | | | |
| Processed 10/17/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |