

No. C 165259		Due no later than Feb 28, 2015		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. EMULATE NATURAL CARE INC JULIE B STAUTS 12898 NORWOOD RD. DONNELLY ID 83615 USA		JULIE BEAMAN STAUTS 12898 NORWOOD RD. DONNELLY 83615			
				3. <u>New</u> 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	
VICE PRESIDENT	ROBERT E STAUTS	12898 NORWOOD RD	DONNELLY	ID	USA	83615	
PRESIDENT	JULIE B STAUTS	12898 NORWOOD RD	DONNELLY	ID	USA	83615	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 165259		Signature: Julie Stauts				Date: 12/29/2014	
		Name (type or print): Julie Stauts				Title: President	
Processed 12/29/2014		* Electronically provided signatures are accepted as original signatures.					