

|                                                                                                                                                        |                 |                                                                                                                                                                    |            |                                                           |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------------------|------------------|-------------|--|
| No. <b>C 137845</b>                                                                                                                                    |                 | <b>Due no later than Feb 28, 2015</b>                                                                                                                              |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |                  |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>FLY GUY RURAL PEST CONTROL COMPANY<br>EDWIN T COLLETT<br>PO BOX 548<br>GRAND VIEW ID 83624<br>USA |            | EDWIN T COLLETT<br>25249 SUB POWER LN<br>GRAND VIEW 83624 |                  |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                    |            | 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 |  |
| PRESIDENT                                                                                                                                              | EDWIN T COLLETT | P.O BOX 548                                                                                                                                                        | GRAND VIEW | ID                                                        | USA              | 83624       |  |
| SECRETARY                                                                                                                                              | CHRIS E COLLETT | P.O BOX                                                                                                                                                            | GRAND VIEW | ID                                                        | USA              | 83624       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                                  |            |                                                           |                  |             |  |
| <b>ID<br/>C 137845</b>                                                                                                                                 |                 | Signature: edwin t collett                                                                                                                                         |            |                                                           | Date: 02/26/2015 |             |  |
|                                                                                                                                                        |                 | Name (type or print): edwin t collett                                                                                                                              |            |                                                           | Title: president |             |  |
| Processed 02/26/2015                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                          |            |                                                           |                  |             |  |