| No. C 147515 | Due no | later than Feb 28, 2017 | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|---|--------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 | Annual Report Form 1. Mailing Address: Correct in this box if needed. MOATS ASSOCIATES CONSULTING, INC. LOUISA C MOATS 800 W MAIN STREET, SUITE 1220 BOISE ID 83702 | | 800 W MAIN S | LOUISA C MOATS 800 W MAIN STREET, SUITE 1220 BOISE ID 83702 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Corporations: Enter Names and Busin | ess Addresses of Presi | dent, Secretary, and Directors. Treasur | er (optional). | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY STEPHEN D MITCHELL PRESIDENT LOUISA C MOATS | | PO BOX 6193 P.O. BOX 6193 | SUN VALLEY SUN VALLEY | ID ID | USA USA | 83354 83354 | |
| 5. Organized Under the Laws of: | 6. Annual Report mus | . Annual Report must be signed.* | | | | | |
| ID | Signature: Carly C | Signature: Carly Costello | | Date: 01/03/2017 | | | |
| C 147515 | Name (type or print): Carly Costello | | | Title: CPA | | | |
| Processed 01/03/2017 | * Electronically provided signatures are accepted as original signatures. | | | | | | |