No. C 159316		Due no later than Mar 31, 2016		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROBERT L MATHEWS 3805 SW 2ND AVE NEW PLYMOUTH ID 83655			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Ac	C.					
		CODR ESTATES ROBERT L MA 3805 SW 2ND	NEW PLYMOUT					
		NEW PLYMOUT	3. <u>New</u> Registered	3. New Registered Agent Signature:*				
4. Corporations: Enter I	Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	ROBERT L I	MATHEWS	3805 SW 2ND AVE	NEW PLYMOUTH	ID	USA	83655	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*						
ID C 159316		Signature: Robert L. Mathews			Date: 01/27/2016			
		Name (type or		Title: Director				
Processed 01/27/2016		* Electronically pro	ovided signatures are accepted as origin	nal signatures.				