| No. C 54488 | | Due no later than Nov 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|---------------|--|--|---|-------------------------------------|-------|---------|-------------|
| Return to: | | Annual Report Form | | JAMES W CARRIE 1365 S 18 E MOUNTAIN HOME ID 83647 | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. | | | | | | |
| | | INTERMOUNTAIN DEVELOPMENT CORPORATION JAMES W CARRIE P. O. BOX 624 | | | MOUNTAIN HOME ID 63047 | | | |
| | | MOUNTAIN HOME ID 83647 | | | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Nar | mes and Busin | ess Addresses of | President, Secretary, and Directors. Tre | easurer (| optional). | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| TREASURER | SHARLENE C | CARRIE | PO BOX 624 | | MOUNTAIN HOME | ID | USA | 83647 |
| DIRECTOR | SHARLENE C | CARRIE | PO BOX 624 | | MOUNTAIN HOME | ID | USA | 83647 |
| DIRECTOR | JIM W CARI | RIE | PO BOX 624 | | MOUNTAIN HOME | ID | USA | 83647 |
| SECRETARY | SHARLENE C | CARRIE | PO BOX 624 | | MOUNTAIN HOME | ID | USA | 83647 |
| PRESIDENT | JIM W CAR | RIE | PO BOX 624 | | MOUNTAIN HOME | ID | USA | 83647 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Sharlene Carrie | | Date: 09/24/2015 | | | | |
| C 54488 | | Name (type or print): Sharlene Carrie | | | Title: Secretary | | | |
| Processed 09/24/2015 | | * Electronically p | ovided signatures are accepted as origi | inal signa | atures. | | | |