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|--|---------------|--|-------|---|---------|-------------|
| No. C 204595 | | Due no later than Jan 31, 2017 | | 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 | | KATHRYN TYLER 250 W RIRIE HWY RIRIE ID 83443-8344 | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 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 | KATHRYN TYLER | 250 W RIRIE HWY | RIRIE | ID | | 83443 |
| SECRETARY | DELL TYLER | 250 W RIRIE HWY | RIRIE | ID | | 83443 |
| DIRECTOR | DELL TYLER | 250 W RIRIE HWY | RIRIE | ID | USA | 83443 |
| DIRECTOR | KATHRYN TYLER | 250 W RIRIE HWY | RIRIE | ID | USA | 83443 |
| TREASURER | KATHRYN TYLER | 250 W RIRIE HWY | RIRIE | ID | USA | 83443 |
| VICE PRESIDENT | DELL TYLER | 250 W RIRIE HWY | RIRIE | ID | USA | 83443 |
| 5. Organized Under the Laws of: WY C 204595 | | 6. Annual Report must be signed.* Signature: dell tyler Name (type or print): dell tyler | | Date: 01/12/2017 Title: vice president | | |
| Processed 01/12/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | |