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| No. C 104813 | | Due no later than Jan 31, 2012 Annual Report Form | | 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 | | 1. Mailing Address: Correct in this box if needed. KNIPE & KNIPE, INC. BRADFORD T KNIPE 1661 W SHORELINE DR STE 200 BOISE ID 83702 USA | | BRADFORD TAYLOR KNIPE 1661 W. SHORELINE STE 200 BOISE ID 83702 | | | |
| | | | | | | 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 | BRADFORD T KNIPE | 2773 S. ARMADA PLACE | BOISE | ID | USA | 83706 | |
| SECRETARY | WILLIAM B KNIPE III | 3624 N. AMBERGINA LANE | BOISE | ID | USA | 83703 | |
| 5. Organized Under the Laws of: ID C 104813 | | 6. Annual Report must be signed.* Signature: Bradford T. Knipe Name (type or print): Bradford T. Knipe Date: 11/07/2011 Title: President | | | | | |
| Processed 11/07/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | | |