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|--|---------------|---|---------|---|---------|-----------------------|--|
| No. C 192470 | | Due no later than Oct 31, 2014 | | 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 1. Mailing Address: Correct in this box if needed. WDE, INC. TINA MADDEN 315 LAKE ST JACKSON TN 38301 | | C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA | | | |
| | | | | 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 | LARRY B REID | 315 LAKE ST | JACKSON | TN | USA | 38301 | |
| SECRETARY | JOHN CAMPBELL | 315 LAKE ST | JACKSON | TN | USA | 38301 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| TN C 192470 | | Signature: Tina Madden | | | | Date: 08/19/2014 | |
| | | Name (type or print): Tina Madden | | | | Title: Office Manager | |
| Processed 08/19/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |