No. C 127635		Due no later than Feb 29, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed.	NATHAN P OLSEN 1411 FALLS AVE E			
		NATHAN P. OLSEN, INC. NATHAN OLSEN PO BOX 5578 TWIN FALLS ID 83303	TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held Na	ame	Street or PO Address	City	State	Country	Postal Code
PRESIDENT NATHAN OLS		EN PO BOX 5578	TWIN FALLS	ID	USA	83303
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Nathan Olsen	Date: 12/12/2011			
C 127635		Name (type or print): Nathan Olsen	Title: President			
Processed 12/12/2011	* Electronically provided signatures are accepted as original signatures.					