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|--|-----------------|---|----------|---|---------|------------------|--|
| No. C 96316 | | Due no later than Sep 30, 2013 | | 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 | | JAMES W PANKEY 532 HARRIS RIDGE RD KOOSKIA ID 83539 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | TRUSS SYSTEMS, INC. LEON SWINEHART 1415 RIPON LEWISTON ID 83501 | | | | | |
| 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 | |
| SECRETARY | LYNDA SWINEHART | 1415 RIPON | LEWISTON | ID | USA | 83501-5738 | |
| TREASURER | LEON SWINEHART | 1415 RIPON | LEWISTON | ID | USA | 83501-5738 | |
| PRESIDENT | LEON SWINEHART | 1415 RIPON | LEWISTON | ID | USA | 83501-5738 | |
| 5. Organized Under the Laws of: ID C 96316 | | 6. Annual Report must be signed.* | | | | | |
| | | Signature: Lynda Swinehart | | | | Date: 10/14/2013 | |
| | | Name (type or print): Lynda Swinehart | | | | Title: Sec | |
| Processed 10/14/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |