

No. C 161832		Due no later than Aug 31, 2014 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. LEGENDS ENTERPRISES, INC. JEFFREY A COX 4415 LEESBURG CIR IDAHO FALLS ID 83404		JEFFREY ALLAN COX 4415 LEESBURG CIR IDAHO FALLS ID 83404			
						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	
TREASURER	JEFFREY A COX	4415 LEESBURG CIRCLE	IDAHO FALLS	ID	USA	83404	
SECRETARY	SHLENE COX	4415 LEESBURG CIRCLE	IDAHO FALLS	ID	USA	83404	
DIRECTOR	SHLENE COX	4415 LEESBURG CIRCLE	IDAHO FALLS	ID	USA	83404	
PRESIDENT	JEFFREY A COX	4415 LEESBURG CIRCLE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of: ID C 161832		6. Annual Report must be signed.* Signature: Jeff Cox Name (type or print): Jeff Cox					
		Date: 06/11/2014 Title: President					
Processed 06/11/2014 * Electronically provided signatures are accepted as original signatures.							