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|--|-----------------|--|------------|---|---------|-------------|--|
| No. C 195586 | | Due no later than Aug 31, 2015 | | 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. JEROME 20/20, INC. ROBERT E WILLIAMS PO BOX 168 JEROME ID 83338 | | ROBERT E WILLIAMS 153 E MAIN ST JEROME ID 83338 | | | |
| | | | | 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 | |
| DIRECTOR | ARLEN B CROUCH | 370 E 500 N | JEROME | ID | USA | 83338 | |
| DIRECTOR | MICHEL L SCHUTZ | 3219 LONGBOW DR | TWIN FALLS | ID | USA | 83301 | |
| 5. Organized Under the Laws of: ID C 195586 | | 6. Annual Report must be signed.* Signature: Robert E Williams Name (type or print): Robert E Williams Date: 06/30/2015 Title: Registered Agent | | | | | |
| Processed 06/30/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |