No. C 93017	Du	Due no later than 8/31/2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. TRIGGER, INC. MAX TWIGGS 763 FRONTAGE RD BLACKFOOT ID 83221		2. Registered Agent and Address (NO PO BOX) MAX TWIGGS 763 FRONTAGE RD BLACKFOOT ID 83221 3. New Registered Agent Signature:		
Return to: SECRETARY OF STA	TE 1. Mailir					
450 NORTH FOURTH PO BOX 83720 BOISE, ID 83720-00	80 RIGGER, MAX TWIG 763 FRONT					
NO FILING FEE RECEIVED BY DUE	IF DATE		5. <u>New</u> Registered	Agent Signatu		
4. Corporations: Enter National Office Held	mes and Business Add Name	resses of President, Secretary and Directors. Street or PO Address	City	State	Zip	
President M	ax J. Twiggs	P.O.Box 1066	Blackfist	1 D	83221	
President M Secretary E.	J. Twiggs	P.O. Box 1066	BlackFot	10	8320.	
			e e e e e e e e e e e e e e e e e e e			
				The state	1	
5. Organized Under the L	aws of: 6. Annual Re	port must be signed.	//			
ID C 93017	Signature:	Signature:				
	Name(type	or print): MAX 1	W1665	litle: PPag	<u> </u>	
Issued 6/12/2009 by Cl.	Н			2009	08000904	