No. <b>C 139971</b>		Due no later than Jul 31, 2014		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.  TIMOTHY J. STOVER, P.A.  TIMOTHY J STOVER  PO BOX 1428  TWIN FALLS ID 83303-1248		TIMOTHY J STOVER 905 SHOSHONE STREET NORTH TWIN FALLS ID 83301  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter N	Names and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer (	optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	JAYNA L TH	OMSON	905 SHOSHONE STREET NORTH P.O. BOX 1428	TWIN FALLS	ID	USA	83303-1428	
PRESIDENT	TIMOTHY J. STOVER		905 SHOSHONE STREET NORTH P.O. BOX 1428	TWIN FALLS	ID	USA	83303-1428	
5. Organized Under the Laws of: 6. Annual Rep		6. Annual Report must I	pe signed.*					
ID		Signature: Timothy J. Stover			Date: 05/12/2014			
C 139971		Name (type or print): Timothy J. Stover			Title: President			
Processed 05/12/2014		* Electronically provided	signatures are accepted as original sign	atures.				