| No. <b>C 41947</b>   |   | Due no later than Feb 28, 2017  |   | 2. Registered Agei                        | 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.  LAZY J RANCH, INC.  LINDA S WILLS  450 POLE LINE RD OFFICE  TWIN FALLS ID 83301 |   | 450 POLE LINE<br>TWIN FALLS ID            | LINDA S WILLS 450 POLE LINE RD OFFICE TWIN FALLS ID 83301  3. New Registered Agent Signature:* |                   |                         |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |   |   |  |                   |                         |  |
| 4. Corporations: Enter Nam   | nes and Busin   | ess Addresses of Pre  | sident, Secretary, and Directors. Treas             | surer (optional).                         |  |                   |                         |  |
| Office Held  | Name  |   | Street or PO Address                                | City                                      | State  | Country           | Postal Code             |  |
| SECRETARY  | RY LINDA S WILLS  |   | 1198 MT. VIEW DR<br>2011 OAKWOOD DR<br>720 W 3750 N | TWIN FALLS<br>TWIN FALLS<br>PLEASENT VIEW | ID<br>UT   | USA<br>USA<br>USA | 83301<br>83301<br>84414 |  |
| 5. Organized Under the Laws of:  |   | 6. Annual Report must be signed.*   |   |   |  |                   |                         |  |
| ID<br>C 41947  |   | Signature: LINDA WILLS Name (type or print): LINDA WILLS  |   |   | Date: 01/27/2017<br>Title: secretary   |                   |                         |  |
| Processed 01/27/2017   | * Electronically provided signatures are accepted as original signatures. |   |   |   |  |                   |                         |  |