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| No. C 172029 | | Due no later than Mar 31, 2012 | | 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. SEABORN ENTERPRISES, INC. WADE W LAMONT 89 NORTH STATE STREET PRESTON ID 83263 | | RODNEY D FONNESBECK 70 EAST 299 SOUTH WESTON ID 83286 | | | |
| | | | | 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 | |
| PRESIDENT | WADE W LAMONT | 89 NORTH STATE STREET | PRESTON | ID | USA | 83263 | |
| DIRECTOR | BRANDON W LAMONT | 89 NORTH STATE STREEET | PRESTON | ID | USA | 83263 | |
| 5. Organized Under the Laws of: ID C 172029 | | 6. Annual Report must be signed.* Signature: Wade LaMont Name (type or print): Wade LaMont | | | | | |
| | | Date: 01/24/2012 Title: President | | | | | |
| Processed 01/24/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |