| No. C 195142 | | | Due no later than Jun 30, 2015 | 2. Registered | 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. PHENIX SANITARY INC. BRIAN F MCCOLL 3858 N GARDEN CENTER WAY STE. 200 BOISE ID 83703 | | 3858 N GAR STE. 200 BOISE ID | BRIAN F MCCOLL 3858 N GARDEN CENTER WAY | | | |
| 4. Corporations: Enter Na | mes and Busin | ess Addresses o | of President, Secretary, and Directors. Treasu | urer (optional). | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY BELINDA PAI | | DDOCK | 4982 N. CURLEW DR. | EAGLE | ID | USA | 83616 | |
| VICE PRESIDENT BILL PADDOO | | | 4982 N. CURLEW DR. | EAGLE | ID | USA | 83616 | |
| PRESIDENT LINDA PADDO | | OCK | 4982 N. CURLEW DR. | EAGLE | ID | USA | 83616 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Brian F. McColl | | Dat | Date: 04/22/2015 | | | |
| C 195142 | | Name (type or print): Brian F. McColl | | Title | Title: Registered Agent | | | |
| Processed 04/22/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |