No. C 96971	Due	e no later than Dec 31, 2015	2. Registered Ag	stered Agent and Address (NO PO BOX)			
Return to:		CHARLES ALL	CHARLES ALLEN SIMS				
		N SIMS					
NO FILING FEE IF RECEIVED BY DUE DATE	THOM ELLEN						
4. Corporations: Enter Names and Bus	iness Addresses of F	resident, Secretary, and Directors. Treasure	er (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY CHARLES ALLEN SIMS DIRECTOR CHARLES ALLEN SIMS PRESIDENT LAURIE SIMS		P.O. BOX 297 629 NORTH 4 TH P.O. BOX 297 629 NORTH 4TH P.O. BOX 297 629 NORTH 4TH	MONTPELIER MONTPELIER MONTPELIER	ID ID ID	USA USA USA	83254 83254 83254	
5. Organized Under the Laws of: 6. Annual Report		must be signed.*					
ID Signat		gnature: Laurie Sims		Date: 12/23/2015			
C 96971	Name (type or	Name (type or print): Laurie Sims		Title: President			
Processed 12/23/2015	* Electronically provided signatures are accepted as original signatures.						