No. C 93039		Due no la	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		RALPH L JACOBS 6125 NORTH GOVERNMENT WAY COEUR D'ALENE ID 83815 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. R. L. JACOBS PLUMBING, INC. RALPH L JACOBS PO BOX 2770 HAYDEN LAKE ID 83835					
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter Nam	nes and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER RALPH L JACOBS SECRETARY RALPH L JACOBS PRESIDENT JEFF JACOBS		2894 NORTH DISTANT STAR ROAD 2894 NORTH DISTANT STAR ROAD 1261 WEST WILBUR AVENUE	POST FALLS POST FALLS COEUR D' ALENE	ID ID ID	USA USA USA	83854 83854 83815	
5. Organized Under the Laws of:		6. Annual Report must l					
ID C 93039		Signature: Kimm But	Date: 09/06/2017				
		Name (type or print):	Title: Bookkeeper				
Processed 09/06/2017	rocessed 09/06/2017 * Electronically provided signatures are accepted as original signatures.						