| No. C 195399 | Due no later than Jul 31, 2014 | 2. Registered Agent and Address (NO PO BOX) |
|--|---|---|
| Return to: | Annual Report Form | SUMMER A EMMERT |
| SECRETARY OF STATE | 1. Mailing Address: Correct in this box if nee | needed. 508 FOSTER COTTONWOOD ID 83522 |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | LAW OFFICE OF SUMMER A. EMMERT, P.C. SUMMER A EMMERT PO BOX 5 | COTTONWOOD ID 83522 |
| | COTTONWOOD ID 83522 | 3. New Registered Agent Signature:* |
| NO FILING FEE IF RECEIVED BY DUE DATE | | |
| 4. Corporations: Enter Names and Busin | ess Addresses of President, Secretary, and Directors. | rs. Treasurer (optional). |
| Office Held Name | Street or PO Address | City State Country Postal Code |
| PRESIDENT SUMMER AN | NN EMMERT 508 FOSTER P.O. BOX 5 | COTTONWOOD ID USA 83522 |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
| ID | Signature: Summer A. Emmert | Date: 06/03/2014 |
| C 195399 | Name (type or print): Summer A. Emmert | Title: President |
| Processed 06/03/2014 | st Electronically provided signatures are accepted as σ | s original signatures. |