| No. <b>C 210483</b>   |                                  | Due no later than Jul 31, 2018   |                                  | 2. Registered Agent and Address (NO PO BOX) |                     |          |            |                |
|---|----------------------------------|--|----------------------------------|---|---------------------|----------|------------|----------------|
| Return to:  |                                  | Annual Report Form   |                                  | CHRISTINE WILSON                            |                     |          |            |                |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080                                  |                                  | 1. Mailing Address: Correct in this box if needed.  AACCCENTER INC CHRISTINE WILSON 3318 N COLE RD PO BOX 44671 BOISE ID 83711 |                                  | 10605 W DASON CT.<br>BOISE ID 83713         |                     |          |            |                |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE  |                                  |  |                                  | 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    |
| VICE PRESIDENT<br>SECRETARY   | IT TED HURLIMAN<br>LISA M WILSON |  | 6523 N OBERLIN<br>2200 2ND AVE N |   | PORTLAND<br>SEATTLE | OR<br>WA | USA<br>USA | 97203<br>98109 |
| 5. Organized Under the Laws of:   |                                  | 6. Annual Report must be signed.*  |                                  |   |                     |          |            |                |
| ID<br>C 210483  |                                  | Signature: Christine Wilson  |                                  |   | Date: 05/31/2018    |          |            |                |
|   |                                  | Name (type or print): Christine Wilson   |                                  |   | Title: President    |          |            |                |
| Processed 05/31/2018 * Electronically provided signatures are accepted as original signatures.                    |                                  |  |                                  |   |                     |          |            |                |