| No. C 72343 | | Due no later than Mar 31, 2009 | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---------------------|---|---|-------------------|---|---------|-------------|--|
| Return to: | | Annual Report Form | | LILLIAN LEWI | LILLIAN LEWIES | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. WARM RIVER CORPORATION LILLIAN L. LEWIES P.O. BOX 593 ASHTON ID 83420 | | WARM RIVER | 1761 LEWIES LN WARM RIVER ID 83420 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter N | ames and Busin | ess Addresses of | f President, Secretary, and Directors. Treasi | urer (optional). | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | LILLIAN L. L | EWIES | P.O. BOX 593 | ASHTON | ID | USA | 83420 | |
| SECRETARY | ARY JULIE B. LEWIES | | P.O. BOX 12 | ST. ANTHONY | ID | USA | 83445 | |
| DIRECTOR | LILLIAN L. LEWIES | | P.O. BOX 593 | ASHTON | ID | USA | 83420 | |
| DIRECTOR | JULIE B. LEWIES | | P.O. BOX 12 | ST. ANTHONY | ID | USA | 83445 | |
| DIRECTOR | LONNIE L. ALLEN | | P.O. BOX 856 | ASHTON | ID | USA | 83420 | |
| DIRECTOR | LINDA E. LE | WIES | 1407 EAST HUNTER DRIVE | MERIDIAN | ID | USA | 83642 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Julie B. Lewies | | | Date: 03/29/2009 | | | |
| C 72343 | | Name (type or print): Julie B. Lewies | | | Title: Secretary | | | |
| Processed 03/29/2009 | _ | * Electronically | provided signatures are accepted as original | l signatures. | • | | | |