Annual Report Form STEPHEN F SMITH 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 1. Mailing Address - Correct in this box, if applicable 2. ANDPOINT, ID 83864 3. New Registered Agent Signature 3. New Registered Agent Signature 2. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. 2. Original President Agent Signature 3. New Registered Agent Signature 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. 3. New Registered Agent Signature 4. Corporations: Enter Names and Business Addresses of President, Secretary and	No. C 138006	Due no later than March 31, 2006		2. Registered Agent and Office NO PO BOX	
RECEIVED BY DUE DATE 1 Corporations: Enter Names and Business Addresses of President, Secretary and Directors. 1 Corporations: Enter Names and Business Addresses of President, Secretary and Directors. 1 Corporations: Enter Names and Business Addresses of President, Secretary and Directors. 1 City State Zip 83864 83864 83864 83864 83864 83864 83864 83864 83866 83866 83866 84866 84866 84866 84866 85866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 86866 868666 868666 86866 868666 868666 868666 868666 868666 868666 8686666 86	Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address - Correct in this box, if CARTER COUNTRY, INC. 357 S OLIVE AVE	applicable	04 SUPERIOR ST SANDPOINT, ID 838	
5. Organized Under the Laws of: 1DAHO 6. Signature Charles Cartes Date 1-14-05	RECEIVED BY DUE DATE	es and Business Addresses of Preside Street or P.O. Address Carter 3981 Elmica Rd. Carter 16142 Hexham dr. Carter 16142 Hexham dr.	nt, Secretary a City Saudpoint Spring Spring	and Directors. State JD TX TX	83864 77279
C 138006 Name (Typed or Charlie Carter Title Vresident 200603007805	IDAHO	6. Signature Charlie Name (Typed or Charlie	Carter		