No. C 137239		D	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		Maria 1971 - Maria	TONYA WARD PO BOX 145 ALMO ID 83312			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CITY OF ROCKS ALMO QUICK RESPONSE UNIT, INC. SARA J WARD PO BOX 145		2002 10 100000 100000				
		ALMO ID 83312		3. New Regist	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of	f President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR SARA JANE WARD DIRECTOR RHODA SIMPER		2800 S NARROWS RD CITY OF ROCKS MAIN ST	MALTA ALMO	ID ID	USA USA	83342 83312		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 137239		Signature: Sara Jane Ward Date:			Date: 02	2/11/2008		
		Name (type		Title: Director				
Processed 02/11/2008	* Electronically provided signatures are accepted as original signatures.							