No. C 43548		Due no later than Mar 31, 2016		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		and the second second second second	ROBERT ALLEN PARSONS II			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. STATE STREET CENTER, INC. ROBERT ALLEN PARSONS II 4683 W. ROWELL DR BOISE ID 83703		BOISE ID	4683 W. ROWELL DR BOISE ID 83703 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busir	ness Addresses o	f President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARY L. PA	ARSONS	2707 WEAVER CIRCLE	BOISE	ID	USA	83704	
DIRECTOR	MARILYN B.	JENNINGS	315 RESERVE STREET	BOISE	ID	USA	83702	
DIRECTOR	RONALD C.	JENNINGS	315 RESERVE STREET	BOISE	ID	USA	83702	
SECRETARY	MARY L. PA	ARSONS	2707 WEAVER CIRCLE	BOISE	ID	USA	83704	
DIRECTOR	ROBERT A.	PARSONS	2707 WEAVER CIRCLE	BOISE	ID	USA	83704	
TREASURER	MARILYN B.	JENNINGS	315 RESERVE STREET	BOISE	ID	USA	83702	
PRESIDENT	RONALD C.	JENNINGS	315 RESERVE STREET	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Robert Allen Parsons II			Date: 02/18/2016			
C 43548		Name (type or print): Robert Allen Parsons II			Title: Registered Agent			
Processed 02/18/2016		* Electronically	provided signatures are accepted as original	signatures.				