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|--|--------------------|--|-------|---|---------|-------------|--|
| No. C 94110 | | Due no later than Jan 31, 2018 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. T. MARTIN, INC. THOMAS J MARTIN PO BOX 140658 GARDEN CITY ID 83714-0658 | | THOMAS MARTIN 1107 HORSESHOE BEND ROAD EAGLE ID 83616 | | | |
| | | | | 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 | |
| PRESIDENT | THOMAS J MARTIN | PO BOX 140658 | BOISE | ID | USA | 83714 | |
| SECRETARY | KATHARINE E MARTIN | PO BOX 140658 | BOISE | ID | USA | 83714 | |
| DIRECTOR | JAMIN T MARTIN | PO BOX 140658 | BOISE | ID | USA | 83714 | |
| 5. Organized Under the Laws of: ID C 94110 | | 6. Annual Report must be signed.* Signature: JAMIN MARTIN Name (type or print): JAMIN MARTIN | | | | | |
| Date: 01/03/2018 Title: DIRECTOR | | | | | | | |
| Processed 01/03/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |