No. C 118313		Du	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		COLUMN TO THE PROPERTY OF THE PARTY OF THE P	BARBARA HODGMAN 6 BAUMAN KINGSTON ID 83839 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TRIAD ENDEAVORS, INC. BARBARA HODGMAN P O BOX 249 PINEHURST ID 83850-0249 USA		KINGSTON I				
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Register				
4. Corporations: Enter Nan	nes and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT BARBARA J HODGMAN DIRECTOR LYNN LARSEN DIRECTOR JOANN D CARLSON		BOX 249 P O BOX 414 P O BOX 573	PINEHURST KELLOGG OSBURN	ID ID ID	USA USA USA	83850 83837-0414 83849-0573		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 118313		Signature: Ba		Date: 01/04/2012				
		Name (type or print): Barbara Hodgman			Title: President			
Processed 01/04/2012 * Electronically provided signatures are accepted as original signatures.								