No. C 71543		Due no later than Dec 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			PATRICK O HUGHES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ERSON CREDI 0-0080 PATRI PO BO		1. Mailing Address: Correct in this box if needed. CREDIT BUREAU OF TWIN FALLS, INC. PATRICK O HUGHES PO BOX 576 TWIN FALLS ID 83303		1106 EASTLAND DR NORTH TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nam	nes and Busine	ess Addresses of Pres	ident, Secretary, and Directors. Treas	surer (d	optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT SECRETARY DIRECTOR DIRECTOR	PATRICK O HUGHES LINDA FISCUS PATRICK O HUGHES KATREENA QUAINTANCE SHANDA D HUGHES		875 HARMONY RD 1571 ASPEN 875 HARMONY RD 1335 9TH AVE E		TWIN FALLS TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA USA USA	83301 83301 83301 83301
DIRECTOR			875 HARMONY RD		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 71543		Signature: PATRICK HUGHES			Date: 11/10/2016			
		Name (type or print): PATRICK HUGHES			Title: PRESIDENT			
Processed 11/10/2016 * Electronically provided signatures are accepted as original signatures.								