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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------|---------|-----------------------|--|
| No. <b>C 181387</b>                                                                                                                                    |                  | <b>Due no later than Jan 31, 2016</b>                                                                                                                                                            |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>                |         |                       |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>CITY-WIDE MOONWALKS, INC.<br>CARL M JONES<br>RR 2 BOX 182A<br>BALLARD RD<br>POCATELLO ID 83202 |           | CARL M JONES<br>RR 2 BOX 182A<br>BALLARD RD<br>POCATELLO ID 83202 |         |                       |  |
|                                                                                                                                                        |                  |                                                                                                                                                                                                  |           | 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           |  |
| TREASURER                                                                                                                                              | JESSICA E MCCANN | 355 SYDNOR ST.                                                                                                                                                                                   | HOUSTON   | TX                                                                | USA     | 77020                 |  |
| SECRETARY                                                                                                                                              | SHANNON K JONES  | RR 2 BOX 182                                                                                                                                                                                     | POCATELLO | ID                                                                | USA     | 83202                 |  |
| PRESIDENT                                                                                                                                              | JOHN R MCCANN    | 355 SYDNOR ST.                                                                                                                                                                                   | HOUSTON   | TX                                                                | USA     | 77020                 |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                                                                |           |                                                                   |         |                       |  |
| <b>ID<br/>C 181387</b>                                                                                                                                 |                  | Signature: Carl M Jones                                                                                                                                                                          |           |                                                                   |         | Date: 11/16/2015      |  |
|                                                                                                                                                        |                  | Name (type or print): Carl M Jones                                                                                                                                                               |           |                                                                   |         | Title: Vice President |  |
| Processed 11/16/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                                        |           |                                                                   |         |                       |  |