

No. C 169309	Due no later than October 31, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX CARLA CLEAVE 607 W GARDEN AVE COEUR D ALENE, ID 83814																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CLEAVE PAINTING, INCORPORATED PO BOX 413 HAYDEN, ID 83835	3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT-</td> <td>DANIEL K. CLEAVE,</td> <td>P.O. BOX 413,</td> <td>Hayden Lake,</td> <td>ID.</td> <td>83835</td> </tr> <tr> <td>V.P., SEC., TREAS.-</td> <td>CARLA R. CLEAVE,</td> <td>P.O. BOX 413,</td> <td>Hayden Lake,</td> <td>ID.</td> <td>83835</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT-	DANIEL K. CLEAVE,	P.O. BOX 413,	Hayden Lake,	ID.	83835	V.P., SEC., TREAS.-	CARLA R. CLEAVE,	P.O. BOX 413,	Hayden Lake,	ID.	83835
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5. Organized Under the Laws of: IDAHO C 169309	6. Signature <u>Carla Cleave</u> Date <u>8/18/08</u> Name (Typed or Printed) <u>CARLA CLEAVE</u> Title <u>V.P., Sec., TREAS.</u>																			

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