| No. C 148883 | Due no later than Apr 30, 2011 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|--|-----------------|---|-------|---------|-------------|
| Return to: | Annual Report Form | | JESSE LEE FLAMAND | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON | 1. Mailing Address: Correct in this box if needed. QUALITY INCORPORATED JESSE LEE FLAMAND 2739 W SELTICE WY | | 2739 W SELTICE WY POST FALLS ID 83854 | | | |
| PO BOX 83720 BOISE, ID 83720-0080 | | | | | | |
| | POST FALLS ID 83854 | | 3. <u>New</u> Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | |
| Office Held Name | Stree | t or PO Address | City | State | Country | Postal Code |
| PRESIDENT JESSE LEE FLAMAND 13044 W. RIVERVIEW DR | | POST FALLS | ID | USA | 83854 | |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | | | | | |
| ID | Signature: Jesse Flamand | | Date: 04/17/2011 | | | |
| C 148883 | C 148883 Name (type or print): Jesse Flamand | | Title: President | | | |
| Processed 04/17/2011 | * Electronically provided signatures are accepted as original signatures. | | | | | |