No. C 203207		Due no later than Aug 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEEEEDSON		Annual Report Form Ig Address: Correct in this box if needed. COUNTY STARS INC. REEDER NSEN DR		SHAWNA REEDER 14611 HENSEN DR NAMPA ID 83651 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
Office Held Name	Business Addresses of Pre	esident, Secretary, and Directors. Tre Street or PO Address	asurer (optional). City	State	Country	Postal Code	
DIRECTOR SHEILA	SWARTZ A REEDER	20831 TRUNNEL CT 14611 HENSEN DR	WILDER NAMPA	ID ID	Couriu y	83676 83651	
5. Organized Under the Laws of: 6. Annual Re		ust be signed.*					
ID	Signature: Shaw	Signature: Shawna L Reeder Date: 06/24/2015					
C 203207	Name (type or p	Name (type or print): Shawna L Reeder			Title: Treasurer		
Processed 06/24/2015	* Electronically prov	* Electronically provided signatures are accepted as original signatures.					