

|                                                                                                                                                        |                  |                                                                                                                                                      |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 144845</b>                                                                                                                                    |                  | <b>Due no later than Jul 31, 2017</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>                                                                                                                            |       | TED ORR<br>2941 HWY #3<br>DEARY ID 83823           |         |             |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>TRI COUNTY TREE HOUND ASSOCIATION INC.<br>DANIELLE LYNAS<br>PO BOX 86<br>VIOLA ID 83872 |       | 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 |  |
| PRESIDENT                                                                                                                                              | TED ORR          | PO BOX 254                                                                                                                                           | DEARY | ID                                                 | USA     | 83823       |  |
| SECRETARY                                                                                                                                              | DANIELLE M LYNAS | PO BOX 86                                                                                                                                            | VIOLA | ID                                                 | USA     | 83872       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 144845</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Dani Lynas<br>Name (type or print): Dani Lynas<br>Date: 06/04/2017<br>Title: Secretary               |       |                                                    |         |             |  |
| Processed 06/04/2017                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                            |       |                                                    |         |             |  |