

|                                                                                                                                                        |                |                                                                                                                                                                     |          |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------|---------|-------------|--|
| No. <b>C 193050</b>                                                                                                                                    |                | <b>Due no later than Dec 31, 2014</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>1. Mailing Address: Correct in this box if needed.</b><br><br>THORPE MANAGEMENT, INC.<br>JAMES G THORPE<br>23498 BOISE RIVER RD<br>CALDWELL ID 83607-9008<br>USA |          | JAMES THORPE<br>23798 BOISE RIVER RD<br>CALDWELL 83607 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                     |          | 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 |  |
| SECRETARY                                                                                                                                              | RENEE D THORPE | 23498 BOISE RIVER RD                                                                                                                                                | CALDWELL | ID                                                     | USA     | 83607       |  |
| PRESIDENT                                                                                                                                              | JAMES G THORPE | 23498 BOISE RIVER RD                                                                                                                                                | CALDWELL | ID                                                     | USA     | 83607       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 193050</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: james thorpe<br>Name (type or print): james thorpe                                                                  |          |                                                        |         |             |  |
| Date: 10/15/2014<br>Title: president                                                                                                                   |                |                                                                                                                                                                     |          |                                                        |         |             |  |
| Processed 10/15/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                           |          |                                                        |         |             |  |