

|  |  |   |  |   |  |  |
|--|--|---|--|---|--|--|
| No. C 184677   |  | Due no later than Oct 31, 2011<br>Annual Report Form  |  | 2. Registered Agent and Office (NOT A P.O. BOX)<br>JOHN ANGUS<br>1249 GRAND AVE STE 321<br>BOISE ID 83702 |  |  |
| Return to:<br><br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF RECEIVED BY DUE DATE</b>   |  | 1. Mailing Address: Correct in this box if needed.<br>SINO COMMUNITY RESOURCES COOPERATIVE, INC<br><br>1249 GRAND AVE STE 321<br>BOISE ID 83702 |  | 3. New Registered Agent Signature.  |  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.<br>Office Held      Name      Street or PO Address      City      State      Country      Postal Code |  |   |  |   |  |  |
| <p><i>Resident Agency Vice President</i><br/> <i>John Angus 1249 Grand Ave, Suite 321</i><br/> <i>Boise, ID 83702</i></p>  |  |   |  |   |  |  |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 184677   |  | 6. Signature: <i>John Angus</i><br>Name (type or print): <i>John Angus</i>  |  | Date: 8/10/11<br>Title: <i>VP RMA</i>   |  |  |
| Issued 08/10/2011 by JL1      113797   |  |   |  |   |  |  |

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of president, secretary, and directors. **Note:** Do not put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include the title for each name listed.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

**POSTMARK DATES WILL NOT BE ACCEPTED**

11 AUG  
SECRETARY OF STATE OF IDAHO  
PMA  
CJS