

No. C 162369		Due no later than Sep 30, 2013		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. COLDWATER CREEK THE SPA INC. MONA TAX DEPT ONE COLDWATER CREEK DR SANDPOINT ID 83864		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA		
				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	NURIA MCCLURE	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
TREASURER	MARK HALEY	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
TREASURER	L MICHELLE CARLONE	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
PRESIDENT	JAMES BELL	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
SECRETARY	VINCENT G TOENJES	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
VICE PRESIDENT	JOHN E HAYES	ONE COLDWATER CREEK DRIVE	SANDPOINT	ID	USA	83864
5. Organized Under the Laws of: ID C 162369		6. Annual Report must be signed.* Signature: L. Michelle Carlone Name (type or print): L. Michelle Carlone Date: 09/06/2013 Title: Assistant Treasurer				
Processed 09/06/2013		* Electronically provided signatures are accepted as original signatures.				