No. C 202252			e no later than May 31, 2016	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. CYCLONES CORPORATION 522 W RIVERTON RD BLACKFOOT ID 83221		522 W RIVER BLACKFOOT	LORI CRONQUIST 522 W RIVERTON RD BLACKFOOT ID 83221-8322 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4 Corporations: Enter Names and Busine		ess Addresses of	President, Secretary, and Directors. Treasi	urer (ontional)				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR DIRECTOR	R LORI CRONQUIST		616 BERGESON DR. 522 W RIVERTON RD 531 KNOX ST	BLACKFOOT BLACKFOOT BLACKFOOT	ID ID ID	USA	83221 83221 83221	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 202252		Signature: Nick Staley Name (type or print): Nick Staley			Date: 05/04/2016 Title: director			
Processed 05/04/2016	* Electronically provided signatures are accepted as original signatures.							