

No. C 180795	Due no later than Nov 30, 2016 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. DIRKS TREE CARE, INC. LISA O DIRKS 284 SKYLINE RD NAPLES ID 83847		LISA O DIRKS 284 SKYLINE RD NAPLES ID 83847			
			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	DOUGLAS R DIRKS	284 SKYLINE RD	NAPLES	ID	USA	83847
VICE PRESIDENT	LISA O DIRKS	284 SKYLINE ROAD	NAPLES	ID	USA	83847
5. Organized Under the Laws of: ID C 180795	6. Annual Report must be signed.* Signature: Lisa O. Dirks Name (type or print): Lisa O. Dirks		Date: 10/10/2016 Title: Owner			
Processed 10/10/2016		* Electronically provided signatures are accepted as original signatures.				