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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------|---------|-------------|--|
| No. <b>C 96519</b>                                                                                                                                     |                | <b>Due no later than Oct 31, 2016</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>CLEAR CREEK PROPERTIES, INC.<br>JACK C MCCALL<br>P O BOX 1598<br>TWIN FALLS ID 83301 |            | JACK C MCCALL<br>409 SHOSHONE ST S #25<br>TWIN FALLS ID 83301 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                       |            | 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 |  |
| DIRECTOR                                                                                                                                               | JACK MCCALL    | PO BOX 1598                                                                                                                                           | TWIN FALLS | ID                                                            | USA     | 83303       |  |
| DIRECTOR                                                                                                                                               | HIRAM FINNEY   | PO BOX 1598                                                                                                                                           | TWIN FALLS | ID                                                            | USA     | 83303       |  |
| DIRECTOR                                                                                                                                               | JAMES K MCCALL | PO BOX 1598                                                                                                                                           | TWIN FALLS | ID                                                            | USA     | 83303       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 96519</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Hiram Finney<br>Name (type or print): Hiram Finney<br>Date: 08/30/2016<br>Title: Director             |            |                                                               |         |             |  |
| Processed 08/30/2016                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                             |            |                                                               |         |             |  |