

No. C 68378		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		1. Mailing Address: Correct in this box if needed. THREE RIVERS RANCH, INCORPORATED LONNIE LEE ALLEN BOX 856 ASHTON ID 83420		LONNIE L ALLEN 1662 HWY 47 WARM RIVER ID 83420			
NO FILING FEE IF RECEIVED BY DUE DATE				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	JUSTIN L. ALLEN	P.O. BOX 856	WARM RIVER	ID	USA	83420	
DIRECTOR	CHAD J. ALLEN	P.O. BOX 856	WARM RIVER	ID	USA	83420	
TREASURER	LONNIE LEE ALLEN	P.O. BOX 856	WARM RIVER	ID	USA	83420	
DIRECTOR	MARY LEE SEELEY	P.O. BOX 856	ASHTON	ID	USA	20136	
SECRETARY	LONNIE LEE ALLEN	P.O. BOX 856	ASHTON	ID	USA	83420	
PRESIDENT	LONNIE LEE ALLEN	P.O. BOX 856	ASHTON	ID	USA	83420	
DIRECTOR	MITCH D. ALLEN	P.O. BOX 856	ASHTON	ID	USA	83420	
VICE PRESIDENT	JUSTIN LEWIES ALLEN	P.O. BOX 856	ASHTON	ID	USA	83420	
DIRECTOR	LONNIE LEE ALLEN	P.O. BOX 856	ASHTON	ID	USA	83420	
5. Organized Under the Laws of: ID C 68378		6. Annual Report must be signed.* Signature: lonnie allen Name (type or print): lonnie allen					
		Date: 10/05/2016 Title: Pres.					
Processed 10/05/2016 * Electronically provided signatures are accepted as original signatures.							