

No. C 129039		Due no later than May 31, 2018 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. NICHOLS LAWN CARE, INC. SHAUN L NICHOLS 826 MEADOW VIEW DR NAMPA ID 83651-2166		SHAUN NICHOLS 826 MEADOW VIEW DR NAMPA ID 83651-2166			
						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	SHAUN L NICHOLS	826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
SECRETARY	SHAUN L NICHOLS	826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
DIRECTOR	SHAUN L NICHOLS	826 MEADOWVIEW DR.	NAMPA	ID	USA	83651-2166	
5. Organized Under the Laws of: ID C 129039		6. Annual Report must be signed.* Signature: Shaun L. Nichols Name (type or print): Shaun L. Nichols					
		Date: 05/26/2018 Title: President					
Processed 05/26/2018 * Electronically provided signatures are accepted as original signatures.							