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|--|-------------------|--|---------------|--|---------|-------------|
| No. C 151167 | | Due no later than Sep 30, 2012 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TREATY ROCK UNIVERSITY, INC. JAMES D DICKINSON 609 N SYRINGA STREET STE A POST FALLS ID 83854 | | JAMES D DICKINSON 609 N SYRINGA STREET POST FALLS ID 83854 | | |
| | | | | 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 | MIKE KENNEDY | 8350 MARABOU DRIVE | HAYDEN | ID | USA | 83814 |
| DIRECTOR | RANDY OAKS | 3646 W LOXTON | COEUR D'ALENE | ID | USA | 83815 |
| DIRECTOR | JAMES D DICKINSON | 609 N SYRINGA STREET | POST FALLS | ID | USA | 83854 |
| DIRECTOR | TIM BRADLEY | 1925 W EVENING STAR RD | POST FALLS | ID | USA | 83854 |
| DIRECTOR | KELLY HUGHES | PO BOX 656 | POST FALLS | ID | USA | 83877 |
| 5. Organized Under the Laws of: ID C 151167 | | 6. Annual Report must be signed.* Signature: James D Dickinson Name (type or print): James D Dickinson Date: 07/22/2012 Title: Director | | | | |
| Processed 07/22/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | |