| No. C 196547 | Due | Due no later than Nov 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|---|------------------|--|---------|-------------|--|
| Return to: | | Innual Report Form | | MARYNETTE L HERNDON | | | |
| 700 WEST TEFEEDSON | | | | 2840 WESTMORELAND DR IDAHO FALLS ID 83402 | | | |
| | IDAHO FALLS I | IDAHO FALLS ID 83402 | | 3. <u>New</u> Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Corporations: Enter Names and B | usiness Addresses of Pi | resident, Secretary, and Directors. Treas | urer (optional). | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT MARYNE | ΓΤΕ L HERNDON | 2840 WESTMORELAND DR | IDAHO FALLS | ID | USA | 83402 | |
| VICE PRESIDENT RICHARD | ALAN HERNDON | 2840 WESTMORELAND DR | IDAHO FALLS | ID | USA | 83402 | |
| | | | | | | | |
| 5. Organized Under the Laws of: 6. Annual F | | nual Report must be signed.* | | | | | |
| GA | Signature: Mar | Signature: Marynette Herndon | | Date: 10/11/2015 | | | |
| C 196547 | Name (type or | Name (type or print): Marynette Herndon | | Title: President | | | |
| Processed 10/11/2015 | * Electronically provided signatures are accepted as original signatures. | | | | | | |