

No. C 147867	Due no later than Feb 28, 2017 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. FIRST CHOICE COLLISION REPAIR, INC. JANNA M GOODE 1704 GARRITY BLVD NAMPA ID 83687-6910		TODD A GOODE 1704 GARRITY BLVD NAMPA ID 83687-6910			
			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	TODD A GOODE	1704 GARRITY BLVD	NAMPA	ID	USA	83687-6910
SECRETARY	JANNA M GOODE	1704 GARRITY BLVD	NAMPA	ID	USA	83687-6910
5. Organized Under the Laws of: ID C 147867	6. Annual Report must be signed.* Signature: THERESA FOSTER Name (type or print): THERESA FOSTER		Date: 12/22/2016 Title: ACCOUNTANT			
Processed 12/22/2016		* Electronically provided signatures are accepted as original signatures.				