| No. C 142445 | | Due no later than Feb 28, 2015 | | 2. | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------|---|-------------------------------------|----|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | | JOSEPH P LUCAS | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. 1919 W STATE STREET INC. LISA C. MAI 1919 W STATE ST BOISE ID 83702 | | | 1919 W STATE ST BOISE 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | 16. | | 11 D | | | |
| 7000 000 00 | | ess Addresses of Preside | ent, Secretary, and Directors. Trea | | • | | | |
| Office Held | Name | | Street or PO Address | (| City | State | Country | Postal Code |
| PRESIDENT | JOSEPH P. | LUCAS | 1919 W. STATE ST. | E | BOISE | ID | USA | 83702 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Lisa C. Mai | | | Date: 01/28/2015 | | | |
| C 142445 | | Name (type or print): Lisa C. Mai | | | Title: Administration | | | |
| Processed 01/28/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |