| No. <b>C 98776</b>   |   | Due no later than Jun 30, 2014  |                                      | 2. Registered Agent and Address (NO PO BOX)  |                                 |             |                |                        |
|--|---|---|--------------------------------------|--|---------------------------------|-------------|----------------|------------------------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |   | Annual Report Form  1. Mailing Address: Correct in this box if needed.  W.K. SMITH, INC.  VIVIAN J SMITH  PO BOX 869  MCCALL ID 83638 |                                      | RANDY MCMAHAN 318 MCBRIDE ST MCCALL ID 83638 |                                 |             |                |                        |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |   |   |                                      | 3. <u>New</u> Registered Agent Signature:*   |                                 |             |                |                        |
| 200  |   | ess Addresses of Presi  | ident, Secretary, and Directors. Tre | easurer (                                    |                                 | Chala       | C              | De etel Ce de          |
| Office Held SECRETARY  | Name VIVIAN J SMITH   |   | Street or PO Address PO BOX 15       |  | City<br>WHITE SULPHUR<br>SPRING | State<br>MT | Country<br>USA | Postal Code 59645-0015 |
| PRESIDENT  | WINFIELD K SMITH  |   | PO BOX 15                            |  | WHITE SULPHUR<br>SPRING         | MT          | USA            | 59645-0015             |
| 5. Organized Under the L   | aws of:   | 6. Annual Report mus  | st be signed.*                       |  |                                 |             |                |                        |
| ID<br>C 98776  |   | Signature: Randy C McMahan  |                                      |  | Date: 04/29/2014                |             |                |                        |
|  |   | Name (type or print): Randy C McMahan   |                                      |  | Title: Cpa                      |             |                |                        |
| Processed 04/29/2014   | * Electronically provided signatures are accepted as original signatures. |   |                                      |  |                                 |             |                |                        |