

No. C 194146		Due no later than Mar 31, 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. LEONA ALEXANDER COMPANY JOHN COLEMAN PO BOX 1293 TWIN FALLS ID 83303		AMY L COLEMAN 2954 E 3400 N TWIN FALLS ID 83301			
						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	JOHN A COLEMAN	PO BOX 1293	TWIN FALLS	ID	USA	83303	
5. Organized Under the Laws of: ID C 194146		6. Annual Report must be signed.* Signature: John Coleman Name (type or print): John Coleman Date: 01/31/2017 Title: President					
Processed 01/31/2017 * Electronically provided signatures are accepted as original signatures.							