0.0000		
No. C 105309	Due no later than Feb 28, 2010	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:	Annual Report Form	PATRICIA JOHNSON
SECRETARY OF STATE	1. Malling Address: Correct in this box if needed.	1918 N 4TH ST
450 N 4th STREET	ADVANCED PEST CONTROL, INC.	· · · · · · · ·
PO BOX 83720	PATRICIA JOHNSON	COEUR D'ALENE ID 83814
BOISE, ID 83720-0080	1918 N 4TH ST	
i i	COEUR D ALENE ID 83814	3. New Registered Agent Signature:
NO FILING FEE IF	COEOR D'ALENE ID 83814	lar trate vederci co viderir aidi tarrile:
RECEIVED BY DUE	•	
DATE		
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and(optional) Treasurer.		
Office Held Name Street or PO Address City State Country Postal Code		
Resident Pat		City State Country Postal Code
LICOIDENT LOT	ricia Solmson 1918 N. 445+ (	seurd Alero, SD US. 83814
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5. Organized Under the Law	s of:  6.	
704110	Signature: attices of some	Date:
IDAHO	- January Jar House	Date: 3-10-10
C 105309	Name (type or print)	
0 100000	+ Hilla Joh	nson Title: Hes.
Issued 03/05/2010 by DK1		
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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.** 

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.

Block 5: May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existance. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED ...