

| | | | | | | | |
|--|---------------------|---|-------|--|---------|------------------|--|
| No. C 149874 | | Due no later than Jul 31, 2014 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TRIPLE D, INC. DIRK MCCALLISTER 1020 BURLEY AVE BUHL ID 83316 USA | | DIRK MCCALLISTER 510 CATTLE AVE FILER ID 83328 | | | |
| | | | | 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 | |
| TREASURER | DARLA D MCCALLISTER | 510 CATTLE AVE. | FILER | ID | USA | 83328 | |
| PRESIDENT | DIRK MCCALLISTER | 510 CATTLE AVE. | FILER | ID | USA | 83328 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 149874 | | Signature: Darla Mccallister | | | | Date: 05/16/2014 | |
| | | Name (type or print): Darla Mccallister | | | | Title: Treasurer | |
| Processed 05/16/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |