

No. C 101838	Due no later than Apr 30, 2018 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.		CRAIG STALLINGS 1433 N. 630 E. SHELLEY ID 83274-8327			
	STATE RECOVERY, INC. CRAIG STALLINGS 1433 N. 630 E. SHELLEY ID 83274 USA		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	CRAIG B STALLINGS	1433 N. 630 E.	SHELLEY	ID	USA	83274
5. Organized Under the Laws of: ID C 101838		6. Annual Report must be signed.* Signature: Craig B Stallings Name (type or print): Craig B Stallings		Date: 03/14/2018 Title: President		
Processed 03/14/2018		* Electronically provided signatures are accepted as original signatures.				