

|  |  |   |                                       |       |         |             |
|--|--|---|---------------------------------------|-------|---------|-------------|
| No. <b>C 75326</b>   | <b>Due no later than Mar 31, 2017</b><br><b>Annual Report Form</b>   | 2. Registered Agent and Address <b>(NO PO BOX)</b>                        |                                       |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>GLENDALE CONSTRUCTION, INC.<br>JOAN SLUDER<br>PO BOX 868<br>BELLEVUE ID 83313 | M JOAN SLUDER<br>186 SLUDER DR<br>BELLEVUE ID 83313                       |                                       |       |         |             |
|  |  | 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 |
| DIRECTOR   | GILBERT T SLUDER   | PO BOX 107  | BELLEVUE                              | ID    | USA     | 83313       |
| TREASURER  | AMBER MCMURDO  | 10944 HWY 75  | BELLEVUE                              | ID    | USA     | 83313       |
| SECRETARY  | M JOAN SLUDER  | PO BOX 22   | BELLEVUE                              | ID    | USA     | 83313       |
| PRESIDENT  | GENE SLUDER  | PO BOX 634  | BELLEVUE                              | ID    | USA     | 83313       |
| VICE PRESIDENT   | PAUL R SLUDER  | 796 WEST 520 NORTH  | SHOSHONE                              | ID    | USA     | 83352       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 75326</b>   | 6. Annual Report must be signed.*<br>Signature: Kim Allen<br>Name (type or print): Kim Allen   |   | Date: 02/28/2017<br>Title: Bookkeeper |       |         |             |
| Processed 02/28/2017   |  | * Electronically provided signatures are accepted as original signatures. |                                       |       |         |             |