No. C 179877 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Aug 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. CHAROLAIS CARE IV, INC. JIM EVERTON 275 S 5TH LOWER LEVEL POCATELLO ID 83201		2. Registered Ag	2. Registered Agent and Address (NO PO BOX) JAMES B EVERTON 275 S 5TH AVE LOWER LEVEL POCATELLO ID 83201 3. New Registered Agent Signature:*			
				LOWER LEVEL POCATELLO				
4. Corporations: Ente	r Names and Busin	ess Addresses of F	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JIM EVERTO	N	275 S. 5TH AVE. LOWER LEVEL	POCATELLO	ID	USA	83201	
DIRECTOR	LEWIS CHANDLER		275 S. 5TH AVE. LOWER LEVEL	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
5. Organized Under t		Signature: Jim Everton			Date: 08/16/2018			
in the state of th		Signature: Jim	Everton		Date. 00/1	0/2010		
3	377		Everton print): Jim Everton		Title: Pres	W		