ANTONOMICS CONTROL CON		r than Sep 30, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Report Form Correct in this box if needed.	CRAIG R WISE  118 N 7TH ST  COEUR D ALENE ID 83814  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held Name	S	treet or PO Address	City	State	Country	Postal Code
		O BOX 4405 O BOX 4405	SPOKANE SPOKANE	WA WA	USA USA	99220 99220
5. Organized Under the Laws of: 6. Annual Report must be signed.*		signed.*				
WA Signature: Timothy Swartout		artout	Date: 08/08/2016			
C 192326 Name (type or print): Timothy So		mothy Swartout	Title: Secretary			
Processed 08/08/2016	* Electronically provided signatures are accepted as original signatures.					