

No. C 47186		Due no later than Mar 31, 2011		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. NORTHERN STATES WHOLESALE, INC. MICHAEL S. SMITH 211 KATHLEEN AVE. COEUR D'ALENE ID 83815 USA		MICHAEL S. SMITH 211 KATHLEEN AVENUE COEUR D'ALENE ID 83815					
				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			
SECRETARY	MICHAEL S SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815			
DIRECTOR	TIMOTHY SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815			
PRESIDENT	VIRGINIA SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815			
5. Organized Under the Laws of: ID C 47186		6. Annual Report must be signed.* Signature: Michael Smith Name (type or print): Michael Smith							
		Date: 01/14/2011 Title: Sec.							
Processed 01/14/2011		* Electronically provided signatures are accepted as original signatures.							