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| No. C 43768 | Due no later than May 31, 2017 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. | | KIM G LEMMON 2757 S. 1050 E. HAGERMAN ID 83332 | | | |
| | BLIND CANYON AQUARANCH, INC. KIM LEMMON 2757 S 1050 E HAGERMAN ID 83332 | | 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 |
| TREASURER | KIM LEMMON | 2757 SOUTH 1050 EAST | HAGERMAN | ID | USA | 83332 |
| SECRETARY | GARY LEMMON | 2775 SOUTH 1050 EAST | HAGERMAN | ID | USA | 83332 |
| PRESIDENT | PAT WINDES | 1424 BOB BARTON RD | WENDELL | ID | USA | 83355 |
| DIRECTOR | JACOB LEMMON | 2354 E MEADOWGRASS ST. | MERIDIAN | ID | USA | 83646 |
| 5. Organized Under the Laws of: ID C 43768 | 6. Annual Report must be signed.* | | | | | |
| | | Signature: Kim Lemmon | Date: 03/21/2017 | | | |
| | | Name (type or print): Kim Lemmon | Title: Treasurer | | | |
| Processed 03/21/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | |