No. C 87379 Return to:		Due no later than Aug 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX) MARTIN L TRAIL			
NO FILING FEE IF RECEIVED BY DUE DATE		7,000011 12 000 10					
4. Corporations: Enter	r Names and Busin	ess Addresses o	of President, Secretary, and Directors. Treasure	er (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	KIM KIRKLAI	ND	1066 W PALOUSE RIVER DRIVE	MOSCOW	ID	USA	83843
TREASURER	BRET CORGATELLI		710 CAMAS STREET	MOSCOW	ID	USA	83843
DIRECTOR	LARRY KIRKLAND		823 LYNN	MOSCOW	ID	USA	83843
SECRETARY	LOREN EUHUS		628 SOUTH HAYES	MOSCOW	ID	USA	83843
PRESIDENT	MARTIN L TRAIL		1010 EAST FIRST STREET	MOSCOW	ID	USA	83843
DIRECTOR	GEOFF ALLEN		1019 JULIENE WAY	MOSCOW	ID	USA	83843
DIRECTOR	DIRECTOR ROBERT GARCIA		905 INDIAN HILLS DRIVE	MOSCOW	ID	USA	83843
DIRECTOR	KIRK BROWER		276 SUNRISE DRIVE	MOSCOW	ID	USA	83843
5. Organized Under the Laws of: 6. Ann		6. Annual Rep	ort must be signed.*				
ID		Signature: Martin Trail		Date: 06/26/2017			
C 87379		Name (type or print): Martin Trail		Title: President			
Processed 06/26/2017	7	* Electronically	provided signatures are accepted as original si	gnatures.			