| No. C 93017 | | Due no later than Aug 31, 2011 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|-----------------|--|--|---|-------|---------|----------------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annı | MAX TWIGGS 763 FRONTAGE RD BLACKFOOT ID 83221 3. New Registered Agent Signature:* | | | | |
| | | 1. Mailing Address: Correct in this box if needed. TRIGGER, INC. MAX TWIGGS PO BOX 1066 BLACKFOOT ID 83221 | | | | | |
| | | | | | | | RECEIVED BY DUE DATE |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held Na | ame | | Street or PO Address | City | State | Country | Postal Code |
| SECRETARY EL | EUNICE J TWIGGS | | 699 FRONTAGE ROAD P O BOX 1066 | BLACKFOOT | ID | USA | 83221-1066 |
| PRESIDENT M. | MAX J TWIGGS | | 699 FRONTAGE ROAD P. O. BOX 1066 | BLACKFOOT | ID | USA | 83221-1066 |
| | | | | | | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Max Twig | Date: 06/13/2011 | | | | |
| C 93017 | | Name (type or print) | Title: President | | | | |
| Processed 06/13/2011 * Electronically provided signatures are accepted as original signatures. | | | | | | | |