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|--|----------------|---|------|--|---------|-------------|--|
| No. C 139949 | | Due no later than Jul 31, 2014 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. CLARIFEYE, PC ROBERT D GRIGG OD 943 N LINDER RD STE 102 KUNA ID 83634 USA | | ROBERT D GRIGG OD 943 N LINDER RD STE 102 KUNA ID 83634-3395 | | | |
| | | | | 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 | |
| PRESIDENT | ROBERT D GRIGG | 894 S JUMP ROPE PL | KUNA | ID | USA | 83634 | |
| SECRETARY | LISA S GRIGG | 894 S JUMP ROPE PL | KUNA | ID | USA | 83634 | |
| 5. Organized Under the Laws of: ID C 139949 | | 6. Annual Report must be signed.* Signature: Robert Grigg Name (type or print): Robert Grigg | | | | | |
| | | Date: 05/13/2014 Title: President | | | | | |
| Processed 05/13/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |