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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 113794</b>                                                                                                                                    |                | <b>Due no later than Feb 28, 2013</b>                                                                                                                        |          | <b>2. Registered Agent and Address (NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>SUNRISE HOME CENTER INC.<br>REBECCA L WRIGHT<br>1463 BRIDGE ST<br>CLARKSTON WA 99403<br>USA |          | PAUL W WRIGHT<br>3122 8TH ST<br>LEWISTON ID 83501  |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                              |          | 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                                                                                                                                              | PAUL W WRIGHT  | 3122 8TH ST                                                                                                                                                  | LEWISTON | ID                                                 | USA     | 83501       |  |
| SECRETARY                                                                                                                                              | REBECCA WRIGHT | 3122 8TH ST                                                                                                                                                  | LEWISTON | ID                                                 | USA     | 83501       |  |
| 5. Organized Under the Laws of:<br><br><b>WA<br/>C 113794</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Rebecca Wright<br>Name (type or print): Rebecca Wright<br>Date: 12/28/2012<br>Title: Secretary               |          |                                                    |         |             |  |
| Processed 12/28/2012                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                    |          |                                                    |         |             |  |