No. <b>C 25156</b>		Due no later than Aug 31, 2018  Annual Report Form		2. Registered Age	2. Registered Agent and Address (NO PO BOX) TOM HIGH			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  KELLEY BEAN CO., INC.  KEVIN L. KELLEY PO BOX 2488			126 SECOND AVENUE NORTH TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE		SCOTTSBLUFF NE 69363		3. <u>New</u> Registered	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Nar	mes and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasi	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	BRYCE KELLEY		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
DIRECTOR	ROBERT L KELLEY JR		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
DIRECTOR	KEVIN L KELLEY		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
TREASURER	JIM LOVERIDGE		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
SECRETARY	CHRISTOPHE	ER KELLEY	2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
PRESIDENT	KEVIN L KELLEY JR		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
DIRECTOR	CHRISTOPHER KELLEY		2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
VICE PRESIDENT	CHRISTOPHE	ER KELLEY	2407 CIRCLE DRIVE	SCOTTSBLUFF	NE	USA	69361	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*						
NE		Signature: Jennifer Swanson			Date: 09/09/2018			
C 25156		Name (type or print): Jennifer Swanson			Title: Accountant			
Processed 09/09/2018		* Electronically provided signatures are accepted as original signatures.						