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|--|-----------------|---|-------|--|---------|--|--|
| No. C 97990 | | Due no later than Mar 31, 2015 Annual Report Form | | 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 | | 1. Mailing Address: Correct in this box if needed. MAGIC VALLEY EXTINGUISHERS, INC. WILLIAM D TYREE 502 6TH ST. P.O. BOX 390 FILER ID 83328-0390 USA | | WILLIAM D TYREE 502 6TH ST FILER 83328-0390 | | | |
| | | | | | | 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 | WILLIAM D TYREE | 502 6TH ST. | FILER | ID | USA | 83328-0390 | |
| SECRETARY | SHELLY J TYREE | 502 6TH ST. | FILER | ID | USA | 83328-0390 | |
| 5. Organized Under the Laws of: ID C 97990 | | 6. Annual Report must be signed.* Signature: William D. Tyree Name (type or print): William D. Tyree | | | | | |
| Processed 01/16/2015 | | * Electronically provided signatures are accepted as original signatures. Date: 01/16/2015 Title: president | | | | | |