| No. <b>C 127274</b>   | D                             | Due no later than Jan 31, 2016  |                                  | 2. Registered Agent and Address (NO PO BOX) |                       |                               |  |
|---|-------------------------------|---|----------------------------------|---|-----------------------|-------------------------------|--|
| 700 WEST JEFFERSON MAUGHAN PO BOX 83720 POISE TO 83770-0080 LYNETTE |                               | Maughan<br>Ridia way  | Form GRANT MAUGHAN               |   |                       |                               |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                            |                               |   |                                  |   |                       |                               |  |
| 200 00 10   | Business Addresses of         | President, Secretary, and Directors. Treas  |                                  | Class                                       | C                     | De stal Carla                 |  |
|   | ΓΕ F MAUGHAN<br>ΓΕ F. MAUGHAN | Street or PO Address<br>2139 CONCORDIA WAY<br>2139 CONCORDIA WAY  | City<br>TWIN FALLS<br>TWIN FALLS | State<br>ID<br>ID                           | Country<br>USA<br>USA | Postal Code<br>83301<br>83301 |  |
| 5. Organized Under the Laws of: ID C 127274                         | Signature: Ly                 | 6. Annual Report must be signed.* Signature: Lynette F Maughan Name (type or print): Lynette F Maughan Title: President |                                  |   |                       |                               |  |
| Processed 11/26/2015  | * Electronically (            | * Electronically provided signatures are accepted as original signatures.   |                                  |   |                       |                               |  |