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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|-------------|
| No. <b>C 170348</b>                                                                                                                                    |                 | <b>Due no later than Dec 31, 2015</b>                                                                                                            |      | 2. Registered Agent and Address <b>(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>CRAMER PUMP SERVICE, INC.<br>STEVEN C CRAMER<br>PO BOX 9<br>BUHL ID 83316           |      | STEVEN C CRAMER<br>4450 N 1449 E<br>BUHL ID 83316  |         |             |
|                                                                                                                                                        |                 |                                                                                                                                                  |      | 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 |
| DIRECTOR                                                                                                                                               | SHAUN C CRAMER  | P.O. BOX 9 3939N 1500E                                                                                                                           | BUHL | ID                                                 | USA     | 83316-0009  |
| VICE PRESIDENT                                                                                                                                         | SHAUN C CRAMER  | P.O. BOX 9 3939N 1500E                                                                                                                           | BUHL | ID                                                 | USA     | 83316-0009  |
| SECRETARY                                                                                                                                              | STEVEN C CRAMER | P.O. BOX 9 4450N 1449E                                                                                                                           | BUHL | ID                                                 | USA     | 83316-0009  |
| PRESIDENT                                                                                                                                              | STEVEN C CRAMER | P.O. BOX 9 4450N 1449E                                                                                                                           | BUHL | ID                                                 | USA     | 83316-0009  |
| 5. Organized Under the Laws of:<br><b>ID<br/>C 170348</b>                                                                                              |                 | 6. Annual Report must be signed.*<br>Signature: Steven c Cramer<br>Name (type or print): Steven c Cramer<br>Date: 12/28/2015<br>Title: President |      |                                                    |         |             |
| Processed 12/28/2015                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                        |      |                                                    |         |             |