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|--|--------------------|---|-------|---|---------|-------------|--|
| No. C 62353 | | Due no later than Oct 31, 2016 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. EIDAM AND ASSOCIATES, LTD. GEOFFREY L JOHNSON 408 E PARKCENTER BLVD. SUITE 215 BOISE ID 83706 | | GEOFFREY L JOHNSON 408 E PARKCENTER BLVD. SUITE 215 BOISE ID 83706 | | | |
| | | | | 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 | GEOFFREY L JOHNSON | 408 E. PARKCENTER BLVD. SUITE 215 | BOISE | ID | USA | 83706 | |
| SECRETARY | MELISSA JOHNSON | 408 E. PARKCENTER BLVD. SUITE 215 | BOISE | ID | USA | 83706 | |
| PRESIDENT | GEOFFREY L JOHNSON | 408 E PARKCENTER BLVD. SUITE 215 | BOISE | ID | USA | 83706 | |
| 5. Organized Under the Laws of: ID C 62353 | | 6. Annual Report must be signed.* Signature: LeAnna Moore Name (type or print): LeAnna Moore Date: 09/06/2016 Title: Office Manager | | | | | |
| Processed 09/06/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |