

No. <b>C 109078</b>	<b>Due no later than Jan 31, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  PROMISES, INC. C/O THOMAS W CALLERY PO BOX 854 LEWISTON ID 83501		THOMAS W CALLERY 1304 IDAHO LEWISTON ID 83501			
			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
SECRETARY	JAMIE C SHROPSHIRE	3032 MAYFAIR DRIVE	LEWISTON	ID	USA	83501
PRESIDENT	THOMAS A SHROPSHIRE	3032 MAYFAIR DRIVE	LEWISTON	ID	USA	83501
5. Organized Under the Laws of:  <b>ID C 109078</b>	6. Annual Report must be signed.* Signature: Thomas A. Shropshire Name (type or print): Thomas A. Shropshire		Date: 01/01/2012 Title: President			
Processed 01/01/2012		* Electronically provided signatures are accepted as original signatures.				