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|--|------------------------------|--|-------|--|---------|------------------|--|
| No. C 109711 | | Due no later than Mar 31, 2018 | | 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 | | MICHAEL T NUXOLL 9983 W. HARNESS DR BOISE ID 83709 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | TUFFY EXCAVATION, INC. MICHAEL T NUXOLL 4028 BANNER STREET BOISE ID 83709 | | | | | |
| 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 | CHRISTA S NUXOLL / LEDBETTER | 9983 W. HARNESS DR. | BOISE | ID | USA | 83709 | |
| PRESIDENT | MICHAEL T NUXOLL SR | 9983 W. HARNESS DR. | BOISE | ID | USA | 83709 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 109711 | | Signature: Michael T. Nuxoll Sr. | | | | Date: 03/05/2018 | |
| | | Name (type or print): Michael T. Nuxoll Sr. | | | | Title: President | |
| Processed 03/05/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |