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|--|---|--|---|-------|---------|-------------|
| No. <b>C 103702</b>  | <b>Due no later than Oct 31, 2018</b><br><b>Annual Report Form</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>WHOLESALE FISHING SUPPLY, INC.<br>LELAND L DAVIS<br>PO BOX 125<br>MONA UT 84645-0125 |  | LARRY CROSS<br>4035 NORTH YELLOWSTONE<br>IDAHO FALLS ID 83403 |       |         |             |
|  |   |  | 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 |
| PRESIDENT  | LELAND L DAVIS  | 160 N 200 E  | MONA  | UT    | USA     | 84645       |
| SECRETARY  | KATHY C DAVIS   | 160 N 200 E  | MONA  | UT    | USA     | 84645       |
| 5. Organized Under the Laws of:<br><br><b>UT<br/>C 103702</b>  |   | 6. Annual Report must be signed.*<br>Signature: Leland Davis<br>Name (type or print): Leland Davis<br><br>Date: 08/23/2018<br>Title: President |   |       |         |             |
| Processed 08/23/2018   |   | * Electronically provided signatures are accepted as original signatures.  |   |       |         |             |