| No. C 170828 | | Due no later than Jan 31, 2014 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------|----------------------------------------------------------------------|---------|-------------|--|
| Return to: | | Annual Report Form | | | SCOTTY TONDEVOLD | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. TONDEVOLD CUSTOM CONSTRUCTION INC SCOTTY TONDEVOLD 220 BOULDER DR OROFINO ID 83544 | | OROFINO II | 220 BOULDER DR OROFINO ID 83544 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Nan | nes and Busin | ess Addresses of | President, Secretary, and Directors. Trea | surer (optional). | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | SCOTTY TO | ONDEVOLD | 220 BOULDER DRIVE | OROFINO | ID | USA | 83544 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: So | | Date: 12/05/2013 | | | | |
| C 170828 | | Name (type or | | Title: President | | | | |
| Processed 12/05/2013 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |