No. <b>C 77091</b>		Due no later than Oct 31, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		J L CRAIG				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.			49 WEST JUDICIAL STREET BLACKFOOT ID 83221			
		ROCKY MOUNTAIN CLAIM SERVICE, INC JEFFREY D CLARK PO BOX 986						
		BLACKFOOT ID 83221-0986		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
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 KORDON F V		WRAY	PO BOX 178		BLACKFOOT	ID	USA	83222
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 77091		Signature: Jeff Clark		Date: 08/24/2018				
		Name (type or print): Jeff Clark		Title: CPA				
Processed 08/24/2018 * Electronically provided signatures are accepted as original signatures.								