

IDAHO SECRETARY OF STATE

p.1

No. C 117170 Return to: SECRETARY OF STATE 700 WEST 4E+1 LARSON PO BOX 83720 BORNE ID 83720-3080 NO FEE REQUIRED		Annual Report Form Due No Later Than November 30		2 Registered Agent and Office - NOT A P.O. BOX DOUGLAS K. KNOTSON 970 SYRINGA DR IDAHO FALLS, ID 83401																			
		DOUGLAS K. KNOTSON, PROFESSIONAL CORPORATION 970 SYRINGA DR IDAHO FALLS, ID 83401		3 Organized Under the Laws of: C 117170 ID																			
4 Corporation, Error Name and Business Address of President, Secretary and Directors: United Liability Corporation. Enter Name and Address of ☐ Managers or ☐ Members (check one)																							
<table border="0"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Douglas Knotson</td> <td>970 Syringa Dr.</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Secretary</td> <td>Barbara Knotson</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>						Office Held	Name	Street or P.O. Address	City	State	Zip	President	Douglas Knotson	970 Syringa Dr.	Idaho Falls	ID	83401	Secretary	Barbara Knotson	"	"	"	"
Office Held	Name	Street or P.O. Address	City	State	Zip																		
President	Douglas Knotson	970 Syringa Dr.	Idaho Falls	ID	83401																		
Secretary	Barbara Knotson	"	"	"	"																		
5 State Registered Agent Signature		Signature: <i>Douglas Knotson</i> Date: 2/16/00 Name (Print or Stamp): Douglas K Knotson Title: President																					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
- NOTE: The name of the business entity cannot be altered on the annual report form.
- If the information must be changed or updated, please make the appropriate corrections.