

No. C 145867	Due no later than Oct 31, 2010 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. MOON RIVER DISTRIBUTING CO. PATRICIA ELROD 1045 S ANCONA AVE STE 150 EAGLE ID 83616		KATHLEEN ROMA 1045 S ANCONA AVE STE 150 EAGLE ID 83616			
			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	PATRICIA ELROD	111 BROADWAY AVE PMB 261	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID C 145867	6. Annual Report must be signed.* Signature: Patricia Elrod Name (type or print): Patricia Elrod		Date: 08/10/2010 Title: President			
Processed 08/10/2010		* Electronically provided signatures are accepted as original signatures.				