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|--|-----------------------|--|----------|--|---------|------------------|--|--|--|
| No. C 161776 | | Due no later than Aug 31, 2018 | | 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. MARSH VALLEY CORPORATION JONNIE N CHRISTIANSEN PO BOX 96 MCCAMMON ID 83250 | | JONNIE CHRISTIANSEN 892 E US HWY 30 MCCAMMON ID 83250-0096 | | | | 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 | JONNIE N CHRISTIANSEN | PO BOX 96 | MCCAMMON | ID | USA | 83250 | | | |
| SECRETARY | NANCY L CHRISTIANSEN | PO BOX 96 | MCCAMMON | ID | USA | 83250 | | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID C 161776 | | Signature: Nancy L Christiansen | | | | Date: 08/26/2018 | | | |
| | | Name (type or print): Nancy L Christiansen | | | | Title: Secretary | | | |
| Processed 08/26/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | | | |