

No. <b>C 48893</b>	Due no later than Feb 28, 2017 Annual Report Form		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			1. <b>Mailing Address: Correct in this box if needed.</b> WOOD RIVER WELDING COMPANY, INC. LESLIE H CAMERON PO BOX 72 BELLEVUE ID 83313	LESLIE H CAMERON 124 GLENDALE RD BELLEVUE ID 83313  3. <u>New</u> Registered Agent Signature.																																		
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country<sup>2</sup></th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>VICE PRESIDENT</td> <td>LESLIE H. CAMERON</td> <td>Box 326</td> <td>BELLEVUE</td> <td>ID</td> <td>BLAINE CO. USA</td> <td>83313</td> </tr> <tr> <td>SEC (NAME ONLY)</td> <td>THELMA J. CAMERON</td> <td>Box 326</td> <td>BELLEVUE</td> <td>ID</td> <td>BLAINE CO. USA</td> <td>83313</td> </tr> <tr> <td>TREASURER</td> <td>MARGARET J. CAMERON</td> <td>Box 177</td> <td>BELLEVUE</td> <td>ID</td> <td>BLAINE CO.</td> <td>83313</td> </tr> <tr> <td>SEC.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country <sup>2</sup>	Postal Code	VICE PRESIDENT	LESLIE H. CAMERON	Box 326	BELLEVUE	ID	BLAINE CO. USA	83313	SEC (NAME ONLY)	THELMA J. CAMERON	Box 326	BELLEVUE	ID	BLAINE CO. USA	83313	TREASURER	MARGARET J. CAMERON	Box 177	BELLEVUE	ID	BLAINE CO.	83313	SEC.						
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>C 48893</b>		6. Signature: <u>Leslie H. Cameron</u> Date: <u>1/6/17</u> Name (type or print): <u>Leslie H. Cameron</u> Title: <u>V.P.</u>																																				
Issued 12/21/2016 by SAT		115641																																				

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM