No. <b>C 103333</b>		ue no later than Sep 30, 2011	2. Registered /	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form ROBERT SIMMONS					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  SIMMONS SANITATION SERVICE, INC.  ROBERT SIMMONS  PO BOX 1523  KAMIAH ID 83536  USA		KAMIAH ID	3230 HWY 162 KAMIAH ID 83536  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registe				
4. Corporations: Enter Names and Bus	iness Addresses o	f President, Secretary, and Directors. Treasu	rer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	V SIMMONS	PO BOX 484 710 MAIN ST	KAMIAH	ID	USA	83536	
	SIMMONS	BOX 415	KAMIAH	ID	USA	83536	
DIRECTOR BARBARA	J SIMMONS	BOX 415	KAMIAH	ID	USA	83536	
5. Organized Under the Laws of: 6. Annual Report n		ort must be signed.*					
ID	Signature: F	Signature: Robert W Simmons Date: 10/06/2011					
C 103333	Name (type	Name (type or print): Robert W Simmons			Title: President		
Processed 10/06/2011	* Electronically	provided signatures are accepted as original	signatures.				