| No. <b>C 189960</b>   |               | Due no later than Feb 28, 2015  |   | 2.         | 2. Registered Agent and Address (NO PO BOX)                       |       |         |             |
|---|---------------|---|---|------------|---|-------|---------|-------------|
| Return to:  |               | Annual Report Form  |   |            | ROBERT PARRISH  |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080              |               | 1. Mailing Address: Correct in this box if needed.  GRASS ROOTS ATHLETICS, INCORPORATED ROBERT PARRISH PO BOX 646 EMMETT ID 83617 |   |            | 800 E LOCUST ST EMMETT 83617  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE  |               |   |   |            |   |       |         |             |
| 4. Corporations: Enter Na   | mes and Busin | ess Addresses of F  | President, Secretary, and Directors. Trea | asurer (op | otional).   |       |         |             |
| Office Held   | Name          |   | Street or PO Address                      | (          | City  | State | Country | Postal Code |
| PRESIDENT   | ROBERT L F    | PARRISH   | 731 N CYGNUS                              | 9          | STAR  | ID    | USA     | 83669       |
| 5. Organized Under the Laws of:   |               | 6. Annual Report must be signed.*   |   |            |   |       |         |             |
| ID  |               | Signature: Robert Parrish   |   |            | Date: 03/13/2015  |       |         |             |
| C 189960  |               | Name (type or print): Robert Parrish  |   |            | Title: President  |       |         |             |
| rocessed 03/13/2015 * Electronically provided signatures are accepted as original signatures. |               |   |   |            |   |       |         |             |