| No. C 172343 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. BUCK KNIVES, INC. LISA POUNDS 660 S LOCHSA ST POST FALLS ID 83854 | | 2. | 2. Registered Agent and Address (NO PO BOX) WITHERSPOON KELLEY DAVENPORT AND TOOLE PS 608 NORTHWEST BLVD STE 300 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:* | | | |
|--|-----------------|---|-------------------------------------|-------------|---|-------|---------|-------------|
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| Corporations: Enter Nar | mes and Busin | ess Addresses of Preside | ent, Secretary, and Directors. Trea | asurer (opt | tional). | | | |
| Office Held | Name | | Street or PO Address | C | City | State | Country | Postal Code |
| PRESIDENT | IDENT CHARLES B | | 660 SO LOCHSA ST | P | OST FALLS | ID | USA | 83854 |
| SECRETARY BRUCE SUNI | | | 660 S LOCHSA ST | P | OST FALLS | ID | USA | 83854 |
| TREASURER | BRUCE SUNI | DAHL | 660 S LOCHSA ST | P | OST FALLS | ID | USA | 83854 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| NV | | Signature: Lisa Pounds | | | Date: 04/15/2011 | | | |
| C 172343 | | Name (type or print): Lisa Pounds | | | Title: Controller | | | |
| Processed 04/15/2011 | | * Electronically provided | d signatures are accepted as origin | nal signatu | res. | | | |