

|                                                                                                                                                        |              |                                                                                                                                                                                                        |               |                                                       |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------|---------------------|
| No. <b>C 33469</b>                                                                                                                                     |              | <b>Due no later than Mar 31, 2015</b>                                                                                                                                                                  |               | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BARGER-MATTSON AUTO SALVAGE, INC.<br>NORMAN LANCASTER<br>2524 E 3719 N<br>TWIN FALLS ID 83301<br>USA |               | NORMAN LANCASTER<br>2524 E 3719 N<br>TWIN FALLS 83301 |                     |
|                                                                                                                                                        |              |                                                                                                                                                                                                        |               | 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 |
| SECRETARY                                                                                                                                              | JAMES RUHTER | 1147 AIR BASE ROAD                                                                                                                                                                                     | MOUNTAIN HOME | ID                                                    | USA 83647           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 33469</b>                                                                                           |              | 6. Annual Report must be signed.*<br>Signature: NORMAN LANCASTER<br>Name (type or print): NORMAN LANCASTER<br>Date: 01/31/2015<br>Title: PRESIDENT                                                     |               |                                                       |                     |
| Processed 01/31/2015                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                                                              |               |                                                       |                     |