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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------|---------|------------------|--|
| No. <b>C 180642</b>                                                                                                                                    |                 | <b>Due no later than Oct 31, 2016</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>TES, INC<br>T EILEEN SCOTT<br>409 RESSEGUIE ST<br>BOISE ID 83702 |       | T EILEEN SCOTT<br>409 RESSEGUIE ST<br>BOISE ID 83702-8370 |         |                  |  |
|                                                                                                                                                        |                 |                                                                                                                                                                    |       | 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      |  |
| PRESIDENT                                                                                                                                              | T. EILEEN SCOTT | 409 RESSEGUIE ST.                                                                                                                                                  | BOISE | ID                                                        | USA     | 83704            |  |
| SECRETARY                                                                                                                                              | LEON F. SCOTT   | 2218 W. STATE ST.                                                                                                                                                  | BOISE | ID                                                        | USA     | 83702            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                 | 6. Annual Report must be signed.*                                                                                                                                  |       |                                                           |         |                  |  |
| <b>ID<br/>C 180642</b>                                                                                                                                 |                 | Signature: T Eileen Scott                                                                                                                                          |       |                                                           |         | Date: 10/28/2016 |  |
|                                                                                                                                                        |                 | Name (type or print): T Eileen Scott                                                                                                                               |       |                                                           |         | Title: Pres.     |  |
| Processed 10/28/2016                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                          |       |                                                           |         |                  |  |