No. <b>C 83112</b>		Annual Report Form  1. Mailing Address: Correct in this box if needed.  TRIPCO, INC. ROSS TRIPLETT 300 FLUME CREEK LANE		2. Registered A	2. Registered Agent and Address (NO PO BOX)  ROSS TRIPLETT 300 FLUME CREEK LANE OROFINO ID 83544-7007  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				300 FLUME C OROFINO ID				
NO FILING RECEIVED BY 4. Corporations: Ente	DUE DATE	ness Addresses of	President, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	ROSS A T	RIPLETT	300 FLUME CREEK LANE	OROFINO	ID	USA	83544-7007	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 83112		Signature: R		Date: 01/12/2018				
		Name (type		Title: President				
Processed 01/12/2018 * Electronically provided signatures are accepted as original signatures.						_		