No. C 14910	b 4	Due no later than May 31, 2	006	2 Registe	red Agent a	nd Office N
Return to:		Annual Report Form		2. Registered Agent and Office N		
SECRETARY OF STATE		1. Mailing Address - Correct in this box, if applicable		TODD A CARLSON 2790 S SPRING BAR WAY		
700 WEST JEFFERSON		TODD CARLSON SALES TRAINING, INC.		MERIDIAN, ID 83642		
PO BOX 83720		TODD A CARLSON			1, 15 00042	•
BOISE, ID 83720-0080		25 S PINE BAR PLACE				
	ME	ERIDIAN, ID 83642		<u> </u>		
NO FILING FEE	E IF			3. New He	gistered Ag	ent Signature
RECEIVED BY	DUE DATE					
 Corporation 	ns: Enter Names a	nd Business Addresses of Presid	lent, Secretary	and Dire	ctors.	
Office held	Name	Street or P.O. Address	City	· · · •	State	7in
PRES	TORN 4 CARLES	U ASAS S. PINE BAR PL		4	I)	<u>Zip</u>
1863					•	33642
utce pres	JENHARES OFF	LSON 2525 5, PONE BY PL	Medizi	A.I	I.D.	83647
UTCE የቂድ <u>ς</u> 5. Organized Under IDA		6.	MEQUEST			
5. Organized Under	r the Laws of:		Saulon	D	ID. ate <u>03-</u>	09-04