

No. C 104869	Annual Report Form <i>Due No Later Than November 30,</i>	2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	Mailing Address: Please Contact if Not Direct CARLISLE & CO, INC. 2300 EAST 17TH ST <i>PO Box 971810</i> IDAHO FALLS, ID 83401 <i>OREM UT 84097</i>	<i>1616 E 17th ST.</i> SHERRY L CARLISLE 2300 EAST 17TH ST IDAHO FALLS, ID 83401																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)		3. Organized Under the Laws of: IDAHO C 104869																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 25%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Sherry Carlisle</td> <td>6575 E. Lydia St.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Vice President</td> <td>Bruce Carlisle</td> <td>6575 E. Lydia St.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table> <p><i>Mailing address: PO Box 971810 Orem UT 84097</i></p> <p><i>RA address: 1616 E 17th St Idaho Falls 83401</i></p>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Sherry Carlisle	6575 E. Lydia St.	Idaho Falls,	ID	83401	Vice President	Bruce Carlisle	6575 E. Lydia St.	Idaho Falls,	ID	83401
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5. <u>New Registered Agent Signature</u>	6. Signature <u><i>Sherry Carlisle</i></u> Date _____ Name (Typed or Printed) <u>Sherry Carlisle</u> Title <u>President</u>																			