Return to:		Annual Report Form			CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SUMMERWINDS GARDEN CENTERS, INC. QUINN M TREMAYNE 390 E. PARKCENTER BLVD.		12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	ent, Secretary, and Directors.	Treasurer (optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	FRANK BENZING		390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
SECRETARY	QUINN M TREMAYNE		390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
DIRECTOR	FRANK BENZING		390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
DIRECTOR	WALT MINNICK		390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
DIRECTOR			390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
DIRECTOR			390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
DIRECTOR	ROBERT OLI	VER	390 E. PARKCENTER BLVD.	SUITE 140	BOISE	ID	USA	83706
5. Organized Under the Laws of: 6. Annual R		6. Annual Report must	nnual Report must be signed.*					
DE		Signature: Quinn Tremayne			Date: 03/31/2017			
C 123298		Name (type or print): Quinn Tremayne			Title: Secretary			
Processed 03/31/2017 * Electronically provided signatures are accepted as original signatures.								

Due no later than Mar 31, 2017

2. Registered Agent and Address (NO PO BOX)

No. **C 123298**