

|                                                                                                                                                        |                  |                                                                                                                                                                              |           |                                                    |         |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------|---------|-------------|
| No. <b>C 38065</b>                                                                                                                                     |                  | Due no later than Jan 31, 2015                                                                                                                                               |           | 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>IDAHO HYDRAULICS, INC.<br>TIM J MORRISON<br>BOX 5396<br>POCATELLO ID 83202 |           | JERRY MORRISON<br>315 HWY AVE.<br>POCATELLO 83201  |         |             |
|                                                                                                                                                        |                  |                                                                                                                                                                              |           | 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                                                                                                                                              | TIM J MORRISON   | 369 FAIRWAY DRIVE                                                                                                                                                            | POCATELLO | ID                                                 | USA     | 83202       |
| SECRETARY                                                                                                                                              | BECKY L MORRISON | 369 FAIRWAY DRIVE                                                                                                                                                            | POCATELLO | ID                                                 | USA     | 83201       |
| DIRECTOR                                                                                                                                               | RICK MORRISON    | 315 HIWAY AVE                                                                                                                                                                | POCATELLO | ID                                                 | USA     | 83202       |
| DIRECTOR                                                                                                                                               | JANETTE MORRISON | 14494 W. PROMISE LANE                                                                                                                                                        | POCATELLO | ID                                                 | USA     | 83202       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 38065</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: tim morrison<br>Name (type or print): tim morrison<br><br>Date: 01/05/2015<br>Title: president                               |           |                                                    |         |             |
| Processed 01/05/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                    |           |                                                    |         |             |