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| No. C 164149 | | Due no later than Dec 31, 2013 | | 2. Registered Agent and Address (NO PO BOX) | | |
| Return to: 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. CABIN CREEK DEVELOPMENT COMPANY CHAD MOFFAT 9175 W STATE ST BOISE ID 83714 | | CHAD MOFFAT 9175 W STATE ST BOISE ID 83714 | | |
| | | | | 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 |
| TREASURER | ANN MOFFAT | 702 W. BEACON LIGHT | EAGLE | ID | USA | 83616-8361 |
| SECRETARY | ANN MOFFAT | 702 W. BEACON LIGHT | EAGLE | ID | USA | 83616-8361 |
| DIRECTOR | ROBERT MOFFAT SR | 6336 N CHARLESTON PLACE | BOISE | ID | USA | 83703-8361 |
| PRESIDENT | CHAD MOFFAT | 702 W. BEACON LIGHT | EAGLE | ID | USA | 83616-8361 |
| 5. Organized Under the Laws of: ID C 164149 | | 6. Annual Report must be signed.* Signature: Stacey Nobles Name (type or print): Stacey Nobles Date: 10/24/2013 Title: Office Manager | | | | |
| Processed 10/24/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | |