No. C 81106		Due no later than Apr 30, 2011		2. Regist	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			LONNIE L ALLEN			
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. LEWIES, INC. LONNIE L ALLEN PO BOX 856 WARM RIVER ASHTON ID 83420 USA			HWY 47 ASHTON ID 83420			
				3. <u>New</u> R	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Trea	asurer (optional).	(
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARY SEELEY		P.O. BOX 856	ASHTO	N ID	USA	83420	
DIRECTOR	CHAD ALLEN		P.O. BOX 856	ASHTO	V ID	USA	83420	
DIRECTOR	JUSTIN ALLEN		P.O. BOX 856	ASHTO	V ID	USA	83420	
DIRECTOR	MITCH ALLEN)		P.O. BOX 856	ASHTO	V ID	USA	83420	
TREASURER	LONNIE ALLEŃ		P.O. BOX 856	ASHTO	N ID	USA	83420	
SECRETARY	LONNIE LEE ALLEN		P. O. BOX 856	ASHTO	V ID	USA	83420	
PRESIDENT	LONNIE LEE	ALLEN	P.O. BOX 856	ASHTO	N ID	USA	83420	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Llonnie Allen			Date: 03/30/2011			
C 81106		Name (type or print): Llonnie Allen			Title: President			
Processed 03/30/2011 * Electronically provided signatures are accepted as original signatures.								