

No. C 153073	Due no later than Feb 28, 2015 Annual Report Form		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. CU RECOVERY, INC. MARION D GORDON 26263 FOREST BLVD WYOMING MN 55092		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705			
			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	KELLY BECKER	26263 FOREST BLVD	WYOMING	MN	USA	55092
5. Organized Under the Laws of: MN C 153073		6. Annual Report must be signed.* Signature: Marion Gordon Name (type or print): Marion Gordon Date: 12/18/2014 Title: Assistant Secretary				
Processed 12/18/2014		* Electronically provided signatures are accepted as original signatures.				