

No. C 178411		Due no later than May 31, 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		1. Mailing Address: Correct in this box if needed. CUSTOM HEARING SERVICE INC DEAN LAURANCE 329 S WOODRUFF IDAHO FALLS ID 83401		DEAN LAURANCE 329 S WOODRUFF IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE				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	DEAN LAURANCE	329 S WOODRUFF AVE		IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID C 178411		6. Annual Report must be signed.* Signature: DEAN LAURANCE Name (type or print): DEAN LAURANCE Date: 05/27/2015 Title: PRES					
Processed 05/27/2015 * Electronically provided signatures are accepted as original signatures.							