

|                                                                                                                                                        |                |                                                                                                                                                                                                   |            |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 196788</b>                                                                                                                                    |                | <b>Due no later than Dec 31, 2014</b>                                                                                                                                                             |            | 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>FLATTOP ROOFING & CONSTRUCTION, INC.<br>TIMOTHY S LACY<br>2424 WOODCREST<br>POST FALLS ID 83854 |            | TIMOTHY LACY<br>2424 WOODCREST<br>POST FALLS 83854 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                                   |            | 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                                                                                                                                              | TIMOTHY S LACY | 2424 WOODCREST                                                                                                                                                                                    | POST FALLS | ID                                                 | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 196788</b>                                                                                          |                | 6. Annual Report must be signed.*<br>Signature: Timothy S Lacy<br>Name (type or print): Timothy S Lacy<br>Date: 01/22/2015<br>Title: President                                                    |            |                                                    |         |             |  |
| Processed 01/22/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                                         |            |                                                    |         |             |  |