No. <b>C 64659</b>		Due no later than Aug 31, 2014 2. Registered Agent and Address (NO PO BOX)					PO BOX)	
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.		F00.14/14/4	LUCINDA L REINKE 590 W WASHINGTON ST			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		TRAVIS JEFFRIES, P.A. KELLY D SONNICHSEN 590 W WASHINGTON ST BOISE ID 83702-5953		BOISE ID	BOISE ID 83702-5953  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Corporations: Enter Nam	es and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	T KELLY D SON		590 W WASHINGTON ST	BOISE	ID	USA	83702-5953	
SECRETARY	CHRIS GOTS	SCH	590 W WASHINGTON ST	BOISE	ID	USA	83702-5953	
DIRECTOR	LUCINDA L REINKE		590 W WASHINGTON ST	BOISE	ID	USA	83702-5953	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Rena D. McKinney		Dat	Date: 06/09/2014			
C 64659		Name (type o	r print): Rena D. McKinney	Titl	Title: Firm Administrator			
Processed 06/09/2014 * Electronically provided signatures are accepted as original signatures.								