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| No. C 155796 | | Due no later than Jul 31, 2016 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. MERRITT L. VANORDEN, CPA, PA MERRITT L VANORDEN 1487 PARKWAY DR BLACKFOOT ID 83221 | | MERRITT L VANORDEN 1487 PARKWAY DR BLACKFOOT ID 83221 | | |
| | | | | 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 | MERRITT L VANORDEN | 1487 PARKWAY DRIVE | BLACKFOOT | ID | USA | 83221 |
| SECRETARY | MANDEE VANORDEN | 1487 PARKWAY DRIVE | BLACKFOOT | ID | USA | 83221 |
| DIRECTOR | MERRITT L VANORDEN | 1487 PARKWAY DRIVE | BLACKFOOT | ID | USA | 83221 |
| 5. Organized Under the Laws of: ID C 155796 | | 6. Annual Report must be signed.* Signature: MERRITT L VANORDEN Name (type or print): MERRITT L VANORDEN Date: 05/24/2016 Title: PRESIDENT | | | | |
| Processed 05/24/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |