No. C 163196		Due no later than Oct 31, 2013		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CHRISTOPHER ANDERSON 28653 N TARGHEE RD ATHOL ID 83801 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RMA STAIRS & TRIM, INC. GABRIELE ANDERSON 28653 N TARGHEE RD ATHOL ID 83801						
NO FILING FEE RECEIVED BY DUE	DATE	ace Addraceae of Pres	ident, Secretary, and Directors. Trea	asurer (or	ntional)			
Office Held	Name	.33 Addresses of Fres	Street or PO Address		City	State	Country	Postal Code
PRESIDENT	CHRISTOPHE	R C ANDERSON	28653 N. TARGHEE RD.		ATHOL	ID	USA	83801
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 163196		Signature: Gabriele Anderson			Date: 08/19/2013			
		Name (type or print): Gabriele Anderson			Title: Vice President			
Processed 08/19/2013		* Electronically provide	ded signatures are accepted as origin	nal signat	ures.			_