| No. C 146109 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Due no later than Nov 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. S. W. SERVICES, INC. BRUCE CRISMAN 220 N.W. CARRIE CIRCLE MOUNTAIN HOME ID 83647 USA | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) BRUCE L CRISMAN 220 N.W. CARRIE CIRCLE MOUNTAIN HOME ID 83647 3. New Registered Agent Signature:* | | | |
|--|---------------|---|---|-------------------------------|---|----------------|-------------|--|
| | | | | 220 N.W. CARR MOUNTAIN HOP | | | | |
| 4. Corporations: Enter Na | mes and Busin | ess Addresses of P | resident, Secretary, and Directors. Treas | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY LORETTA L. CRISMAN PRESIDENT BRUCE L. CRISMAN | | 220 N.W. CARRIE CIRCLE 220 N.W. CARRIE CIRCLE | MOUNTAIN HOMI MOUNTAIN HOMI | | USA USA | 83647 83647 | | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 146109 | | Signature: Bruce Crisman | | | Date: 11/06/2013 | | | |
| | | Name (type or print): Bruce Crisman | | | Title: President | | | |
| Processed 11/06/2013 | | * Electronically pro | ovided signatures are accepted as origina | l signatures. | | | | |