| No. C 114689 | | Due no later than Apr 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. CRAIG D. HOLMAN, CHARTERED CRAIG D HOLMAN 250 W 500 S JEROME ID 83338-5963 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) CRAIG D HOLMAN 250 W 500 S JEROME ID 83338-5963 3. New Registered Agent Signature:* | | | |
|--|-------------------------------------|---|--|------------------------|--|------------|--------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | 250 W 500 JEROME II | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA ess Addresses of President, Secretary, and Directors. Treasurer (opti | | agurar (antional) | | | | |
| Office Held Name | | ess Addresses of | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY PRESIDENT | CHERYLYN R HOLMAN CRAIG D HOLMAN | | 250 W 500 S 250 W 500 S | JEROME JEROME | ID ID | USA USA | 83338-5963 83338-5963 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 114689 | | Signature: Ch | | Date: 06/11/2015 | | | | |
| | | Name (type o | | Title: Secretary | | | | |
| Processed 06/11/2015 | | * Electronically p | rovided signatures are accepted as origi | nal signatures. | | | | |