No. C 25344		Due no later than Jan 31, 2014		2. Registered Agen	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND	C. TIMOTHY HOPKINS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SALISBURY CORPORATION (THE) C. TIMOTHY HOPKINS 428 PARK AVENUE			428 PARK AVE IDAHO FALLS ID 83402 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS ID 83402		3. <u>New</u> Registered				
4. Corporations: Enter Na	mes and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	SUSAN RUSSELL		50 THE ESPLANADE	PEPPERMINT GROVE		AUSTRALIA	6011	
DIRECTOR	DONALD SALISBURY, JR.		713 ISLAND VIEW DR.	SEAL BEACH	CA	USA	90740	
TREASURER	CLAUDE LEG		170 GOLDEN OAK DR.	PORTOLA VALLEY		USA	94028	
SECRETARY	CLAUDE LEG		170 GOLDEN OAK DR.	PORTOLA VALLEY		USA	94028	
PRESIDENT	CYNTHIA M. SALISBURY		170 GOLDEN OAK DR.	PORTOLA VALLEY	CA	USA	94028	
DIRECTOR	MARC LEGLI	SE	170 GOLDEN OAK DR.	PORTOLA	CA	USA	94028	
5. Organized Under the Laws of:		6. Annual Repor						
ID		Signature: C. Timothy Hopkins		Date:	Date: 11/26/2013			
C 25344		Name (type or print): C. Timothy Hopkins		Title:	Title: Registered Agent			
Processed 11/26/2013 * Electronically provided signatures are accepted as original signatures.								