No. C 130663	D	Due no later than Oct 31, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:	4 Mailine	Annual Report Form 1. Mailing Address: Correct in this box if needed. CARDS PLUS, INC. LEONARD O SHIVELY 3020 CAYSIE LN. IDAHO FALLS ID 83402 USA		LEONARD SHIVELY 3020 CAYSIE LN. IDAHO FALLS ID 83402 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CARDS PLUS, LEONARD O 3020 CAYSIE						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and E	Business Addresses of	President, Secretary, and Directors. Trea	asurer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT LEONAR	D O SHIVELY	3020 CAYSIE LN.	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Le	Signature: Leonard Shively		Date: 11/22/2010			
C 130663	Name (type o	Name (type or print): Leonard Shively		Title: President			
Processed 11/22/2010	* Electronically p	* Electronically provided signatures are accepted as original signatures.					