| No. C 85988 | | Due | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | | |
|---|----------------------|---|---|---|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. PEOPLES FURNITURE COMPANY SUSAN WAGNER 525 W STATE ST WEISER ID 83672 | | | WADE A HILLIARD, JR. 27133 OLD FORT BOISE ROAD | | | |
| | | | | PARMA ID 83660 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Nar | mes and Busin | ess Addresses of Pr | esident, Secretary, and Directors. Treasure | er (optional). | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY | RY WADE HILLIARD, JR | | 27498 OLD FORT BOISE ROAD | PARMA | ID | USA | 83660 | |
| TREASURER | WADE A HILLIARD, JR | | 27498 OLD FORT BOISE ROAD | PARMA | ID | USA | 83660 | |
| PRESIDENT SUSAN K HILLIARD | | | 525 STATE STREET | WEISER | ID | USA | 83672 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: BILL | | Date: 02/02/2017 | | | | |
| C 85988 | | Name (type or p | | Title: MANAGER | | | | |
| Processed 02/02/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |