| No. <b>C 60940</b>   |      | Due no later than Apr 30, 2017  |                                    | 2. Registered Agent and Address (NO PO BOX)  |                                      |       |         |             |
|--|------|---|------------------------------------|--|--------------------------------------|-------|---------|-------------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |      | Annual Report Form  1. Mailing Address: Correct in this box if needed.  BARRY ENTERPRISES, INC. GORDON BARRY 366 WASHINGTON ST. TWIN FALLS ID 83301 |                                    | GORDON BARRY 366 WASHINGTON ST. TWIN FALLS ID 83301  3. New Registered Agent Signature:* |                                      |       |         |             |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine                 |      | ass Addrassas of Pr   | ecident Secretary and Directors Tr | eacurer (  | ontional)                            |       |         |             |
|  | Name | C33 Addi C33C3 Oi 11  | Street or PO Address               | casarci (  | City                                 | State | Country | Postal Code |
| PRESIDENT GORDON BARRY   |      | 760 CARRIAGE LANE NORTH   |                                    | TWIN FALLS   | ID                                   | USA   | 83301   |             |
| 5. Organized Under the Laws of:  ID  C 60940   |      | 6. Annual Report must be signed.* Signature: Gordon Barry Name (type or print): Gordon Barry  |                                    |  | Date: 03/16/2017<br>Title: President |       |         |             |
| Processed 03/16/2017 * Electronically provided signatures are accepted as original signatures. |      |   |                                    |  |                                      |       |         |             |