No. C 113171		Due no later than Dec 31, 2012		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MELVA WORKMAN 799 HANKINS RD TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WORKMAN MANAGEMENT, INC. BILL WORKMAN 799 HANKINS RD TWIN FALLS ID 83301						
NO FILIN RECEIVED BY	OUE DATE	noss Addresses d	f President, Secretary, and Directors. Trea	acurer (opt	ional)			
Office Held	Name	iless Addi esses c	Street or PO Address		city	State	Country	Postal Code
PRESIDENT	MELVA WC	RKMAN	799 HANKINS RD		WIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Bill Workman			Date: 01/09/2013			
C 113171		Name (type or print): Bill Workman			Title: Manager			
Processed 01/09/201	13	* Electronically	provided signatures are accepted as origin	nal signatu	res.			