No. **C 47186**	**Due no later than Mar 31, 2013** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** NORTHERN STATES WHOLESALE, INC. MICHAEL S. SMITH 211 KATHLEEN AVE. COEUR D'ALENE ID 83815 USA	MICHAEL S. SMITH 211 KATHLEEN AVENUE COEUR D'ALENE ID 83815 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	MICHAEL S SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815
DIRECTOR	TIMOTHY SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815
PRESIDENT	VIRGINIA SMITH	211 KATHLEEN	COEUR D ALENE	ID	USA	83815

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 47186**	Signature: Michael Smith	Date: 02/04/2013
	Name (type or print): Michael Smith	Title: Secretary

Processed 02/04/2013

* Electronically provided signatures are accepted as original signatures.