No. **J 1100**	**Due no later than Jan 31, 2014** **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.** SURGE CONTROL, LLP WILLIAM F WILSON PO BOX 38 COTTONWOOD ID 83522-0038 USA	WILLIAM F WILSON 202 BEAR RIDGE RD COTTONWOOD ID 83522 3. New Registered Agent Signature:*

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PARTNER	WILLIAM F WILSON	PO BOX 38	COTTONWOOD	ID	USA	83522
PARTNER	JUANITA K WILSON	PO BOX 38	COTTONWOOD	ID	USA	83522

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **J 1100**	Signature: William Wilson	Date: 01/27/2014
	Name (type or print): William Wilson	Title: Owner

Processed 01/27/2014

* Electronically provided signatures are accepted as original signatures.