No. C 139971		Due no later than Jul 31, 2016		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. TIMOTHY J. STOVER, P.A. TIMOTHY J STOVER PO BOX 1428 TWIN FALLS ID 83303-1248		TIMOTHY J STOVER 905 SHOSHONE STREET NORTH TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter	Names and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY	JAYNA L TH	IOMSON	905 SHOSHONE STREET NORTH P.O. BOX 1428	TWIN FALLS	ID	USA	83303-1428
PRESIDENT	TIMOTHY J. STOVER		905 SHOSHONE STREET NORTH P.O. BOX 1428	TWIN FALLS	ID	USA	83303-1428
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*					
ID C 139971		Signature: Timothy J	Date: 05/27/2016				
		Name (type or print): Timothy J. Stover			Title: President		
Processed 05/27/2016		* Electronically provided signatures are accepted as original signatures.					