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| No. C 104362 | | Due no later than Dec 31, 2015 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. RIVERSIDE SERVICE GROUP, INC. KATHLEEN HANSEN 557 S WOODRUFF AVE IDAHO FALLS ID 83401 | | KATHLEEN HANSEN 3925 N AMMON RD IDAHO FALLS ID 83401 | | | |
| | | | | | | 3. <u>New</u> 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 | |
| PRESIDENT | KATHLEEN ANN HANSEN | 3925 N AMMON RD | IDAHO FALLS | ID | USA | 83401 | |
| SECRETARY | KATHLEEN HANSEN | 3925 N AMMON RD | IDAHO FALLS | ID | USA | 83401 | |
| VICE PRESIDENT | TERRY H HANSEN | 3925 N AMMON RD | IDAHO FALLS | ID | USA | 83401 | |
| 5. Organized Under the Laws of: ID C 104362 | | 6. Annual Report must be signed.* Signature: Kathleen Hansen Name (type or print): Kathleen Hansen | | | | | |
| | | Date: 10/19/2015 Title: President | | | | | |
| Processed 10/19/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |