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|--|----------------|--|-----------|--|---------|-------------|--|
| No. C 169861 | | Due no later than Nov 30, 2009 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TRIPLE L TOWING & REPAIR INC DAVID L WILLIAMS 2044 HORIZON DR POCATELLO ID 83204-2515 | | KAREN WILLIAMS 1825 N MAIN ST POCATELLO ID 83204 | | | |
| | | | | 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 | KAREN WILLIAMS | 2044 HORIZON DR | POCATELLO | ID | USA | 83201-2515 | |
| 5. Organized Under the Laws of: ID C 169861 | | 6. Annual Report must be signed.* Signature: Karen G Williams Name (type or print): Karen G Williams Date: 09/09/2009 Title: President | | | | | |
| Processed 09/09/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |