No. C 201409		Du	e no later than Mar 31, 2017	2. Registered Age	. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LAURENE SOF	LAURENE SORENSEN 106 E THIRD ST STE 4A			
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.		TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER				
		HYPERSPUD FOUNDATION, INC. LAURENE SORENSEN PO BOX 9826 MOSCOW ID 83843		MOSCOW ID 83843 3. New Registered Agent Signature:*				
4. Corporations: Enter Names a	and Busin	ess Addresses of I	President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Nar	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR LAURETTA C			404 VAN BUREN ST APT 1	MOSCOW	ID		83843	
			3100 W TWIN RD	MOSCOW	ID		83843	
DIRECTOR ELIZ	ZABETH (SIBBS	162 RIVERVIEW AVE	MIDDLETOWN	RI	USA	02842	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 201409		Signature: Laurene Sorensen		Date	Date: 03/31/2017			
		Name (type or print): Laurene Sorensen		Title: Registered Agent				
Processed 03/31/2017	* Electronically provided signatures are accepted as original signatures.							