| No. C 133071 | | Due no | later than Mar 31, 2012 | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|-------------|--------------------------------------|---|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | KAREN D MARTIN | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | | | 4025 N GOVERNMENT WAY STE 6 COEUR D'ALENE ID 83815 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Corporations: Enter Name | s and Busin | ess Addresses of Presid | dent, Secretary, and Directors. Treasurer | (optional). | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| PRESIDENT K | (aren d m | ARTIN | 4025 N GOVERNMENT WAY SUITE 6 | COEUR D'ALENE | ID | USA | 83815-9217 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Karen D Martin | | Date: 01/10/2012 | | | |
| C 133071 | | Name (type or print): Karen D Martin | | Title: President | | | |
| rocessed 01/10/2012 * Electronically provided signatures are accepted as original signatures. | | | | | | | |

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| C 133071 | | Name (type or print): Karen D Martin | | Title: President | | | |
| rocessed 01/10/2012 * Electronically provided signatures are accepted as original signatures. | | | | | | | |