No. <b>C 135462</b>		Due no later than Sep 30, 2017 Annual Report Form		2. Registered Ag	Registered Agent and Address (NO PO BOX)     TRAVIS HYER			
Return to:				TRAVIS HYE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ONIONSKIN PLAYERS INC. (THE)  LARRY D LAKEY  PO BOX 1440  ONTARIO OR 97914		HOMEDALE I	1201 HYER LANE HOMEDALE ID 83628  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		ONTAID ON	37311	or <u>r.u</u> regiotor				
4. Corporations: Enter N	ames and Busine	ess Addresses of	President, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARK DORM	IUS	PO BOX 1440	ONTARIO	OR	USA	97914	
DIRECTOR	DANNY JACOBSEN		PO BOX 1440	ONTARIO	OR	USA	97914	
DIRECTOR	APRIL TURNER		PO BOX 1440	ONTARIO	OR	USA	97914	
DIRECTOR	CANDY SNYDER		PO BOX 1440	ONTARIO	OR	USA	97914	
DIRECTOR	ALICIA CAVAZOS		PO BOX 1440	ONTARIO	OR	USA	97914	
TREASURER	LARRY D LA	KEY	PO BOX 1440	ONTARIO	OR	USA	97914	
VICE PRESIDENT	RUTH A CREEK		PO BOX 1440	ONTARIO	OR	USA	97914	
SECRETARY	PAM LAKEY		PO BOX1440	ONTARIO	OR	USA	97914	
PRESIDENT	LISA MEYER		PO BOX 1440	ONTARIO	OR	USA	97914	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
OR C 135462		Signature: Larry D Lakey Date: 08/11/2017						
		Name (type or print): Larry D Lakey Title: treasurer						
Processed 08/11/2017		* Electronically p	rovided signatures are accepted as origin	al signatures.				