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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 87886</b>                                                                                                                                     |                 | <b>Due no later than Nov 30, 2012</b>                                                                                                                                |             | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>J.C.N.B INC.<br>JAMES H BOLAND<br>910 NO. ALMON<br>MOSCOW ID 83843 |             | JAMES H BOLAND<br>910 NO. ALMON<br>MOSCOW ID 83843 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                      |             | 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 |  |
| DIRECTOR                                                                                                                                               | JAMES F. BOLAND | 6150 W. 33RD S.                                                                                                                                                      | IDAHO FALLS | ID                                                 | USA     | 83402       |  |
| SECRETARY                                                                                                                                              | CELIA N BOLAND  | 910 N. ALMON                                                                                                                                                         | MOSCOW      | ID                                                 | USA     | 83843       |  |
| PRESIDENT                                                                                                                                              | JAMES H. BOLAND | 910 N. ALMON                                                                                                                                                         | MOSCOW      | ID                                                 | USA     | 83843       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 87886</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Celia N Boland<br>Name (type or print): Celia N Boland<br>Date: 09/13/2012<br>Title: Secretary                       |             |                                                    |         |             |  |
| Processed 09/13/2012                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                            |             |                                                    |         |             |  |