2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 26, 2000 8:00 am Secretary of State DOCUMENT # F9900000743 1. Entity Name IDAHO TIMBER CORPORATION OF MOUNTAIN HOME, INC. 01-26-2000 90015 035 ***150.00 Principal Place of Business Mailing Address P.O. BOX 67 P.O. BOX 67 BOISE ID 83707 BOISE ID 83707-0067 000113162. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 82-0356876 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution, Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CP TITLE ☐ Delete TITLE Addition NAME WILLIAMS, LARRY NAME STREET ADDRESS STREET ADDRESS 5401 KENDALL ST. CITY-ST-ZIP CITY-ST-ZIP **BOISE ID 83706** Addition ☐ Change TITLE ☐ Delete TITI F NAME WILLIAMS, MARIANNE 5401 KENDALL ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOISE ID 83706 TITLE ☐ Delete ☐ Change Addition TITLE WILLIAMS, DELBERT NAME NAME STREET ADDRESS STREET ADDRESS 5401 KENDALL ST. CITY-ST-ZIP CITY-ST-ZIP **BOISE ID 83706** ☐ Delete TITLE TITLE Change ☐ Addition NAME RUDD, BRYANT NAME STREET ADDRESS STREET ADDRESS 5401 KENDALL ST. CITY-ST-ZIP CITY-ST-ZIE **BOISE ID 83706** TITLE ☐ Delete TITLE ☐ Change Addition ANDERSON, PAUL NAME NAME STREET ADDRESS STREET ADDRESS 5401 KENDALL ST. CITY-ST-ZIP CITY-ST-ZIP **BOISE ID 83706** TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or rustee empowered to execute this propriate propriate Dhapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with all address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-2 600 208 311 300L