(CORPORATION SOLE) ANNUAL LIST OF SUBSCRIBER OF

ENTITY NUMBER

100301

NAME OF CORPORATION SOLE

FOR THE FILING PERIOD OF _____ TO _____

USE BLACK INK ONLY - DO NOT HIGHLIGHT

YOU MAY NOW FILE YOUR LIST ONLINE AT www.nvsilverflume.gov

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type name and address, either residence or business, of subscriber or successor submitting the list. The **Subscriber or Successor** must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*

ABOVE SPACE IS FOR OFFICE USE ONLY

2. If there are additional subscribers, attach a list of them to this form.
3. Return the completed form with the $25.00 filing fee. A $50.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business.
5. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A **copy fee of $2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
6. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
7. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE: $25.00 LATE PENALTY: $50.00 (if filing late)

SUBSCRIBER/SUCCESSOR

NAME	TITLE		
ADDRESS	CITY	STATE	ZIP CODE

None of the subscribers/successors identified in the list of subscriber has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a subscriber/successor in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X _____ **Title** _____ **Date** _____

Signature of Subscriber, Successor or Other Authorized Signature

Nevada Secretary of State List Subscriber
Revised: 8-8-13

Reset