

|  |                 |  |        |  |         |  |  |
|--|-----------------|--|--------|--|---------|--|--|
| No. <b>C 179389</b>  |                 | <b>Due no later than Jul 31, 2013</b><br><b>Annual Report Form</b>   |        | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |         |  |  |
| Return to:<br><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>1. Mailing Address: Correct in this box if needed.</b><br><br>SALMON SAVAGE BOOSTERS, INC.<br>TAMMY OVERACKER<br>PO BOX 132<br>SALMON ID 83467        |        | PAUL B WITHERS<br>1301 MAIN ST<br>SALMON ID 83467    |         |  |  |
|  |                 |  |        |  |         | 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                                |  |
| PRESIDENT  | FRED SNOOK      | 44 CEMETERY LN   | SALMON | ID   | USA     | 83467                                      |  |
| TREASURER  | TAMMY OVERACKER | 190 HWY 93 NORTH   | SALMON | ID   | USA     | 83467                                      |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 179389</b>  |                 | 6. Annual Report must be signed.*<br><br>Signature: Tammy Overacker<br>Name (type or print): Tammy Overacker<br><br>Date: 07/08/2013<br>Title: Treasurer |        |  |         |  |  |
| Processed 07/08/2013 * Electronically provided signatures are accepted as original signatures.   |                 |  |        |  |         |  |  |