

| | | | | | | |
|--|----------------|--|-----------|--|---------|-------------|
| No. C 119365 | | Due no later than May 31, 2018 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. SHOSHONE COUNTY FOOD BANK, INC. JO ANN GROVES PO BOX 85 KELLOGG ID 83837 | | GARY WOODY 317 EMERALD DR KELLOGG ID 83837 | | |
| | | | | 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 | KELLIE LAVIGNE | BOX 328 | SILVERTON | ID | USA | 83867 |
| PRESIDENT | GARY WOODY | 317 EMERALD DR. | KELLOGG | ID | USA | 83837 |
| SECRETARY | JO ANN GROVES | 902 S DIVISION | WARDNER | ID | USA | 83837 |
| DIRECTOR | GAIL NEARING | BOX 504 | PINEHURST | ID | USA | 83850 |
| DIRECTOR | SANDRA NEARING | BOX 511 | PINEHURST | ID | USA | 83850 |
| 5. Organized Under the Laws of: ID C 119365 | | 6. Annual Report must be signed.* Signature: Jo Ann Groves Name (type or print): Jo Ann Groves | | | | |
| | | Date: 03/21/2018 Title: Sec/Tres | | | | |
| Processed 03/21/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | |