| No. <b>C 31267</b>   |   | Due no later than Oct 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  TWIN COUNTY UNITED WAY, INC.  SAMANTHA SKINNER  2207 E MAIN ST  LEWISTON ID 83501 |  | 2. Registered Ag   | 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 |   |  |  | 2207 E MAIN<br>LEWISTON II                               | LEZLEY DRAKE 2207 E MAIN ST LEWISTON ID 83501  3. New Registered Agent Signature:* |                                 |   |  |
| 4. Corporations: Enter N   | lames and Busin   | ess Addresses o  | f President, Secretary, and Directors. Treas   | surer (optional).  |  |                                 |   |  |
| Office Held  | Name  |  | Street or PO Address   | City   | State  | Country                         | Postal Code                               |  |
| DIRECTOR PRESIDENT VICE PRESIDENT SECRETARY TREASURER  | SAMANTHA<br>TIM BARKEF<br>KIM CASEY<br>CHARITY RA<br>MIKE BLY | 2  | 2207 E MAIN ST<br>2207 E. MAIN<br>2207 E. MAIN ST.<br>2207 E. MAIN ST.<br>2207 E. MAIN ST. | LEWISTON<br>LEWISTON<br>LEWISTON<br>LEWISTON<br>LEWISTON | ID<br>ID<br>ID<br>ID   | USA<br>USA<br>USA<br>USA<br>USA | 83501<br>83501<br>83501<br>83501<br>83501 |  |
| 5. Organized Under the Laws of:  |   | 6. Annual Report must be signed.*  |  |  |  |                                 |   |  |
| ID<br>C 31267  |   | Signature: SAMANTHA SKINNER  Name (type or print): SAMANTHA SKINNER  |  |  | Date: 09/25/2015 Title: EXECUTIVE DIRECTOR   |                                 |   |  |
| Processed 09/25/2015   |   | * Electronically   | provided signatures are accepted as origina  | al signatures.   |  |                                 |   |  |