No. C 90400		Due no later than Sep 30, 2009 Annual Report Form		2. Registered A	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					SUE MATTISON			
		1. Mailing Address: Correct in this box if needed. EMERGENCY NURSES ASSOCIATION SNAKE RIVER CHAPTER INC. SUE MATTISON 1892 W HENDRICKS CT MERIDIAN ID 83646-1326		MERIDIAN I	1892 W HENDRICKS CT MERIDIAN ID 83646-1326			
					3. <u>New</u> Registered Agent Signature:*			
200 00 00		ess Addresses of	President, Secretary, and Directors. Treasur					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	BARB FORD		1467 CASCADE RD	EMMETT	ID	USA	83617-4214	
SECRETARY	CHRISTINE S	SHIRAZI	10557 N BIRDIE WAY	BOISE	ID	USA	83714-9598	
TREASURER	SUE MATTIS	SON	1892 W. HENDRICKS CT	MERIDIAN	ID	USA	83646-1326	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 90400		Signature: Sue Mattison			Date: 09/04/2009			
		Name (type o		Title: Treasurer				
Processed 09/04/2009		* Electronically provided signatures are accepted as original signatures.						