

|                                                                                                                                                        |                  |                                                                                                                                                               |             |                                                              |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>C 179833</b>                                                                                                                                    |                  | <b>Due no later than Aug 31, 2011</b>                                                                                                                         |             | <b>2. Registered Agent and Address (NO PO BOX)</b>           |         |             |  |
| Return to:<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>GRIZZLY YOUTH FOOTBALL, INC.<br>MICHAEL J WHYTE<br>2635 CHANNING WAY<br>IDAHO FALLS ID 83404 |             | MICHAEL J WHYTE<br>2635 CHANNING WAY<br>IDAHO FALLS ID 83404 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                               |             | 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                                                                                                                                               | TAMMIE WHYTE     | 1455 BLUE RIDGE CIRCLE                                                                                                                                        | IDAHO FALLS | ID                                                           | USA     | 83402       |  |
| DIRECTOR                                                                                                                                               | CHEYENNE SWANSON | 3045 LAURENCE                                                                                                                                                 | IDAHO FALLS | ID                                                           | USA     | 83402       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 179833</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Michael J. Whyte<br>Name (type or print): Michael J. Whyte<br>Date: 06/17/2011<br>Title: registered Agent     |             |                                                              |         |             |  |
| Processed 06/17/2011                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                     |             |                                                              |         |             |  |