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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 193699</b>                                                                                                                                    |             | <b>Due no later than Feb 29, 2016</b>                                                                                                                              |      | 2. Registered Agent and Address <b>(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>DISTINGUISHED YOUNG WOMEN OF TROY INCORPORATED<br>JULIE A FRY<br>515 CHRISTIE ST<br>TROY ID 83871 |      | VICKY BLEDSOE<br>101 TROJAN DR<br>TROY ID 83871    |         |             |  |
|                                                                                                                                                        |             |                                                                                                                                                                    |      | 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                                                                                                                                              | JAMES D FRY | 515                                                                                                                                                                | TROY | ID                                                 | USA     | 83871       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 193699</b>                                                                                          |             | 6. Annual Report must be signed.*<br>Signature: Julie Fry<br>Name (type or print): Julie Fry<br>Date: 03/02/2016<br>Title: Chairman                                |      |                                                    |         |             |  |
| Processed 03/02/2016                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                          |      |                                                    |         |             |  |