No. C 169181		Due no later than Oct 31, 2016		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		SHANNON COBURN				
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. IDAHO AREA 18, INC. THAD NICOLAI 1111 SO. ORCHARD #180 BOISE ID 83705		_	1111 S ORCHARD #180 BOISE ID 83705 3. New Registered Agent Signature:*			
4. Corporations: Enter Name	s and Busine	ess Addresses of Presi	dent, Secretary, and Directors. Trea	asurer (optional).			
Office Held N	Name		Street or PO Address		City	State	Country	Postal Code
DIRECTOR THAD NICOL		AI	1111 SO. ORCHARD #180		BOISE	ID	USA	83705
DIRECTOR BARRY SMIT		TH 1111 SO. ORCHARD #180			BOISE	ID	USA	83705
SECRETARY NEIL WARD			1111 SO. ORCHARD #180		BOISE	ID	USA	83705
TREASURER M	R MELISSA SCHWAI		1111 SO. ORCHARD #180		BOISE	ID	USA	83705
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 169181		Signature: Melissa Schwan			Date: 10/18/2016			
		Name (type or print): Melissa Schwan			Title: Treasurer			
Processed 10/18/2016		* Electronically provid	ed signatures are accepted as origir	nal signa	atures.			