No. C 75838		Annual Report Form 1. Mailing Address: Correct in this box if needed. REGION V CHAPTER OF THE IDAHO OUTFITTERS AND GUIDES ASSOCIATION, INC. ROBERT R ANDERSON		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				ROBERT R ANDERSON				
				5646 SORRELL DR POCATELLO ID 83202 3. New Registered Agent Signature:*				
4. Corporations: Enter Nam	es and Busin	ess Addresses of	President, Secretary, and Directors. Tre	easurer ((optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
SECRETARY MARY ANDER		RSON	5646 SORRELL DR.		POCATELLO	ID	USA	83202
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 75838		Signature: Robert R. Anderson			Date: 03/28/2017			
		Name (type o	Title: President					
Processed 03/28/2017 * Electronically provided signatures are accepted as original signatures.								