No. C 31267		Due no later than Oct 31, 2014 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:					LEZLEY DRAKE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		PART TOWNS THE TOWN OF THE TOWN	2207 E MAIN ST LEWISTON ID 83501			
		TWIN COUNTY UNITED WAY, INC. LEZLEY DRAKE 2207 E MAIN ST LEWISTON ID 83501						
				3. <u>New</u> Register	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter	Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasu	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	LAYCI PEER		2207 E. MAIN	LEWISTON	ID	USA	83501	
TREASURER BARBARA FRY		RY	2207 E. MAIN ST.	LEWISTON	ID	USA	83501	
SECRETARY	KIM CASEY		2207 E. MAIN ST.	LEWISTON	ID	USA	83501	
PRESIDENT	MIKE BERGHAMMER		2207 E. MAIN ST.	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: 6		6. Annual Report	must be signed.*					
ID C 31267		Signature: Layci Peer		Date: 08/	Date: 08/26/2014			
		Name (type or print): Layci Peer		Title: Exe	Title: Executive Director			
Processed 08/26/2014		* Electronically provided signatures are accepted as original signatures.						