No. C 73019 Return to:		Due no later than Jun 30, 2015 Annual Report Form		Registered Agent and Address (NO PO BOX) BRIAN ALSPACH											
								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.		1703 W WARREN ST BOISE ID 83706			
ALBERT W. JARDINE CHAPTER 22, DISABLED AMERICAN VETERANS DEPARTMENT OF IDAHO, INC. HARVEY DIXON 529 W ELWOOD DR BOISE ID 83706															
		3. New Registered Agent Signature:*													
						4. Corporations: Enter	Names and Busi			ness Addresses of	President, Secretary, and Directors. Treasurer	(optional).			
						Office Held	Name				Street or PO Address	City	State	Country	Postal Code
PRESIDENT	BRIAN L AI	LSPACH	444. WEST FORT STREET RM 143	BOISE	ID	USA	83702								
5. Organized Under the Laws of:		6. Annual Report must be signed.*													
ID C 73019		Signature: Bri	Date: 06/26/2015												
		Name (type o	Title: President												
Processed 06/26/2015 * Electronically provided signatures are accepted as original signatures.															