No. C 196037  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Sep 30, 2013 Annual Report Form  1. Mailing Address: Correct in this box if needed.  CAPITAL HIGH SCHOOL SWIM TEAM, INC. IRINA KAZAKOVA 2419 N SEVENOAKS PL EAGLE ID 83616		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
				10.00 C 10.00	ROBERTA CUPPS			
				BOISE ID 83	9218 W RIFLEMAN CT BOISE ID 83704  3. New Registered Agent Signature:*			
				3. <u>New</u> Registere				
4. Corporations: Ente	r Names and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	TIM ALBERDA		4967 N RIVERFRONT PL	GARDEN CITY	ID	USA	83714	
DIRECTOR	MARY ANDE	:RSON	10482 W BLACKSTONE ST	GARDEN CITY	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 196037		Signature: Robbie Cupps Date: 08/28/2013						
		Name (type or print): Robbie Cupps			Title: Director			
Processed 08/28/201	3	* Electronically provi	ded signatures are accepted as original	signatures.				