No. C 63849		Due no later than May 31, 2018 Annual Report Form		2. Registered	2. Registered Agent and Address (NO PO BOX) GINA WADDELL 270 SOUTH ORCHARD BOISE ID 83705 3. New Registered Agent Signature:*			
Return to:								
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. CAPITOL YOUTH SPORTS ASSOCIATION, INC. 270 S ORCHARD BOISE ID 83705						
				BOIZE ID				
				3. New Regist				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasur	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	KURT LIEBICH		1650 E HOLLY ST	BOISE	ID	USA	83712	
DIRECTOR	CONNIE BARTICH		4162 N LA FONTANA WAY	BOISE	ID	USA	83702	
DIRECTOR	BRIAN KANE		12756 N 11TH AVE	BOISE	ID	USA	83714	
DIRECTOR	JOHN KLUKSDAL		1312 HARRISON BLVD	BOISE	ID	USA	83702	
SECRETARY	SZABINA REVELLE		2295 S RIVA RIDGE AVE	BOISE	ID	USA	83709	
PRESIDENT	HENRY THOMPSON		1488 KNIGHTS DR	BOISE	ID	USA	83712	
TREASURER	KATHY HURLEY		3392 S ASHBURY PL	BOISE	ID	USA	83706	
DIRECTOR	MICHAEL BENNION		9238 WEST BEACHSIDE LANE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report r	must be signed.*					
ID		Signature: Gina Waddell		D	Date: 03/20/2018			
C 63849		Name (type or print): Gina Waddell			Title: Office Manager			
Processed 03/20/2018 * Electronically provided signatures are accepted as original signatures.								