

No. C 61958		Due no later than Aug 31, 2012 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. DOMESTIC VIOLENCE SEXUAL ASSAULT CENTER INCORPORATED MARY L HATCH COMPLEX 1050 MEMORIAL DRIVE IDAHO FALLS ID 83402		TEENA MCBRIDE 1050 MEMORIAL DR IDAHO FALLS ID 83402		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	SANDEE MOORE	3100 CHANNING WAY	IDAHO FALLS	ID	USA	83404
DIRECTOR	LORENA MURDOCK	3430 SOUTH HOLMES	IDAHO FALLS	ID	USA	83404
DIRECTOR	ALISA PRUDENT	605 N. CAPITAL AVENUE	IDAHO FALLS	ID	USA	83402
DIRECTOR	BARBARA WALSH	325 LA COSTA DRIVE	IDAHO FALLS	ID	USA	83401
DIRECTOR	KRIS STANGER	3589 SUN CIRCLE	IDAHO FALLS	ID	USA	83404
VICE PRESIDENT	JO ANNA STENZEL	6305 RED RAOCK DRIVE	IDAHO FALLS	ID	USA	83401
SECRETARY	DAVID FRY	1055 AUSTIN	IDAHO FALLS	ID	USA	83404
TREASURER	DOUG WINCHESTER	3456 17TH STREET	IDAHO FALLS	ID	USA	83406
PRESIDENT	LORI PRIEST	1343 HERRING STREET	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of: ID C 61958		6. Annual Report must be signed.* Signature: TEENA MCBRIDE Name (type or print): TEENA MCBRIDE Date: 06/18/2012 Title: Executive Director				
Processed 06/18/2012		* Electronically provided signatures are accepted as original signatures.				