

No. <b>C 140604</b>		<b>Due no later than Sep 30, 2018</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> CARIBOU COUNTY SENIOR CITIZEN CENTER, INC. SHALAYNE BARTSCHI 60 S MAIN ST SODA SPRINGS ID 83276 USA		SHALAYNE BARTSCHI 60 S MAIN ST. SODA SPRINGS ID 83276-1426		
				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
PRESIDENT	EDWARD PARISE	3026 ISLAND CIRCLE	SODA SPRINGS	ID	USA	83276
VICE PRESIDENT	CHARLES FRYAR	P.O BOX 43	SODA SPRINGS	ID	USA	83276
DIRECTOR	RON PARKER	771 E. 4TH N.	SODA SPRINGS	ID	USA	83276
SECRETARY	JOANN RHODES	85 SOUTH 7TH EAST	SODA SPRINGS	ID	USA	83276
DIRECTOR	ROBERT LAU	40 WEST 4TH SOUTH	SODA SPRINGS	ID	USA	83276
TREASURER	LUCETTA HOLT	PO BOX 9	GRACE	ID	USA	83276
DIRECTOR	KELLY HOLT	PO BOX 9	GRACE	ID	USA	83241
DIRECTOR	BLAIR WINWARD	380 S. 2ND E.	SODA SPRINGS	ID	USA	83276
DIRECTOR	JASON CUNNINGHAM	740 PIONEER DR	SODA SPRINGS	ID	USA	83276
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
<b>ID</b> <b>C 140604</b>		Signature: ShaLayne Bartschi			Date: 08/13/2018	
		Name (type or print): ShaLayne Bartschi			Title: Director	
Processed 08/13/2018		* Electronically provided signatures are accepted as original signatures.				