No. <b>C 131454</b>		Due	2	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			JEFF HAWKER 427 SOUTH 200 WEST BURLEY ID 83318  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		MINI-CASSIA YOUTH CONTACT FOOTBALL LEAGUE, INC. CHIMENE SMITH PO BOX 481 BURLEY ID 83318						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of F	resident, Secretary, and Directors. Treas	surer (o	ptional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
TREASURER (	CHIMENE L	SMITH	397 N OVERLAND		BURLEY	ID	USA	83318
SECRETARY TANETTE MO			220 N CENTER		OAKLEY	ID	USA	83346
DIRECTOR SHELLY WOI		F	397 N OVERLAND		BURLEY	ID	USA	83318
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Chimene Smith			Date: 10/27/2010			
C 131454		Name (type or print): Chimene Smith			Title: Treasurer			
Processed 10/27/2010	* Electronically provided signatures are accepted as original signatures.							