

No. C 194971		Due no later than Jun 30, 2014 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. TENSED AMBULANCE SERVICE, INCORPORATED LEANN DAMAN PO BOX 6 306 HAWK LANE TENSED ID 83870-0006		LEANN DAMAN 1586 SHEEP CREEK ROAD DESMET ID 83824			
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	PAUL DAMAN	1586 SHEEP CREEK ROAD	TENSED	ID	USA	83824	
5. Organized Under the Laws of: ID C 194971		6. Annual Report must be signed.* Signature: Leann Daman Name (type or print): Leann Daman					
		Date: 04/17/2014 Title: Treasurer					
Processed 04/17/2014 * Electronically provided signatures are accepted as original signatures.							