

No. C 158899		Due no later than Feb 28, 2018 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. SNAKE RIVER HEMOPHILIA AND BLEEDING DISORDERS ASSOCIATION, INC. CHAD STEVENS PO BOX 245 NEWDALE ID 83436		CHAD E STEVENS 520 CHURCH ST NEWDALE ID 83436			
						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	CHAD E STEVENS	520 CHURCH STREET BOX 245	NEWDALE	ID	USA	83436-5084	
SECRETARY	ANGIE BOLING	1589 BLUE BIRD LANE	IDAHO FALLS	ID	USA	83402	
VICE PRESIDENT	SCOTT BOLING	1589 BLUE BIRD LANE	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: ID C 158899		6. Annual Report must be signed.* Signature: Chad Stevens Name (type or print): Chad Stevens					
		Date: 01/03/2018 Title: President					
Processed 01/03/2018		* Electronically provided signatures are accepted as original signatures.					