

No. C 185614	Due no later than Dec 31, 2017	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	Annual Report Form		JULIA MATSON 3647 LEMHI RD LEADORE ID 83464
	1. Mailing Address: Correct in this box if needed. LEADORE EMERGENCY MEDICAL TECHNICIANS INC STACY FINDLEY PO BOX 51 LEADORE ID 83464-0051		
		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	MATASON JULIA	3617 LEMHI ROAD	LEADORE ID USA 83464
VICE PRESIDENT	TAWNA JONES	P.O. BOX 52	LEADORE ID USA 83464
SECRETARY	SHANNA L FOSTER	P.O. BOX 155	LEADORE ID USA 83464
5. Organized Under the Laws of: ID C 185614		6. Annual Report must be signed.* Signature: Shanna L Foster Date: 01/17/2018 Name (type or print): Shanna L Foster Title: Secretary	
Processed 01/17/2018		* Electronically provided signatures are accepted as original signatures.	