No. C 36110		Due no later than Jan 31, 2015		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BOUNDARY VOLUNTEER AMBULANCE SERVICE, INCORPORATED KENNETH BAKER PRESIDENT		6447 RAILROAI BONNERS FERR	KENNETH BAKER 6447 RAILROAD ST BONNERS FERRY 83805 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		PO BOX 441 BONNERS FERRY ID 83805		3. <u>New</u> Registered				
4. Corporations: Enter N	ames and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasu	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	WANDA WILKERSON		32 STARLIGHT RD	NAPLES	ID	USA	83845	
DIRECTOR	JIM PAULUS		282 CALVARY LANE	NAPLES	ID	USA	83847	
DIRECTOR	NANCY RUSSELL		411 SYRINGA DR.	BONNERS FERRY	' ID	USA	83805	
SECRETARY	MARY ANN TRITT		PO BOX 455	MOYIE SPRINGS	ID	USA	83847	
PRESIDENT	KENNETH V BAKER		PO BOX 1342	BONNERS FERRY	' ID	USA	83805	
DIRECTOR	RECTOR DANIEL MOORE		6531 TANNENBAUM	BONNERS FERRY	' ID	USA	83805	
DIRECTOR	KEN ENGLISI	Н	1955 ROSSEVELT ST.	MOYIE SPRINGS	ID	USA	83847	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 36110		Signature: Mary Ann Tritt			Date: 01/07/2015			
		Name (type or print): Mary Ann Tritt			Title: Secretary			
Processed 01/07/2015		* Electronically pro	ovided signatures are accepted as original	l signatures.				