




No. <b>C 142760</b>	<b>Due no later than Feb 28, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> ROBERT D LEWIS 1423 TYRELL LN BOISE ID 83706
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SELWAY INSTITUTE, INC. MAURICE G HORNOCKER PO BOX 929 BELLEVUE ID 83313		3. <u>New</u> Registered Agent Signature.

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.
 

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRES.	MAURICE HORNOCKER	Box 929	BELLEVUE	ID	US	83313
DIRECTOR	HOWARD HASH	8630 HWY 93	PINEY CREEK	NC	US	28663
DIRECTOR	STEVE PETERSON	4777 RIVER RD	JUNEAU	AK	US	99801
SECY	LESLIE HORNOCKER	Box 929	BELLEVUE	ID	US	83313

5. Organized Under the Laws of:  <div style="text-align: center; padding: 10px;">             IDAHO              C 142760           </div>	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">           Signature: <u></u> </td> <td style="width: 40%;">           Date: <u>12-29-14</u> </td> </tr> <tr> <td>           Name (type or print): <u>MAURICE HORNOCKER</u> </td> <td>           Title: <u>PRES.</u> </td> </tr> </table>	Signature: <u></u>	Date: <u>12-29-14</u>	Name (type or print): <u>MAURICE HORNOCKER</u>	Title: <u>PRES.</u>
Signature: <u></u>	Date: <u>12-29-14</u>				
Name (type or print): <u>MAURICE HORNOCKER</u>	Title: <u>PRES.</u>				

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