No. <b>C 76074</b>		Due no later than Jun 30, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  CARIBOU COMMUNITY THEATER, INCORPORATED MAZIE PORTER MAZIE PORTER P O BOX 914		2. Registered Age	Registered Agent and Address (NO PO BOX)  MAZIE C. PORTER  PORTER			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				331 S. 1ST WEST SODA SPRINGS ID 83276				
		SODA SPRINGS ID 83276		3. <u>New</u> Registered	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DARLEY VON	VANDEGRIFF	2968 TRAIL CANYON RD.	SODA SPRINGS	ID	USA	83276	
DIRECTOR	PAM SHULER		251 COURT ST.	SODA SPRINGS	ID	USA	83276	
DIRECTOR	MIKE MESSERLY		106 S MAIN	SODA SPRINGS	ID	USA	83276	
DIRECTOR	NONA COLLINS		20 W 3RD SOUTH	SODA SPRINGS	ID	USA	83276	
DIRECTOR	DIRECTOR TERRY HATCH		180 S 2ND WEST	BANCROFT	ID	USA	83217	
TREASURER	R MAZIE C PORTER		331 S 1ST WEST PO BOX 914	SODA SPRINGS	ID	USA	83276	
SECRETARY	TARY DANA MCCURDY		816 E MAIN	GRACE	ID	USA	83241	
PRESIDENT	PAUL KOWALLIS		14 CITATION CT.	SODA SPRINGS	ID	USA	83276	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Mazie C. Porter			Date: 06/23/2009			
C 76074		Name (type or print): Mazie C. Porter			Title: Treasurer			
Processed 06/23/2009		* Electronically provide	ded signatures are accepted as original s	ignatures.				