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|--|----------------|---|-----------|--|---------|-------------|--|
| No. C 189339 | | Due no later than Dec 31, 2013 | | 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. BLACKFOOT YOUTH SOCCER ASSOCIATION, INC PATRICIA JENSEN PO BOX 373 BLACKFOOT ID 83221 | | CLINT HUFFMAN 871 WILDROSE LN BLACKFOOT ID 83221 | | | |
| | | | | 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 | |
| DIRECTOR | CLINT HUFFMAN | 871 WILD ROSE | BLACKFOOT | ID | USA | 83221 | |
| PRESIDENT | CASEY CLEMENTS | 420 S UNIVERSITY | BLACKFOOT | ID | USA | 83221 | |
| DIRECTOR | LIAM POPE | 77 W RICH LN | BLACKFOOT | ID | USA | 83221 | |
| 5. Organized Under the Laws of: ID C 189339 | | 6. Annual Report must be signed.* Signature: Patricia Jensen Name (type or print): Patricia Jensen | | | | | |
| Date: 01/30/2014 Title: Treasurer | | | | | | | |
| Processed 01/30/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |