

No. C 86464		Due no later than Apr 30, 2015		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 1. Mailing Address: Correct in this box if needed. NATIONAL ALLIANCE ON MENTAL ILLNESS - BOISE CHAPTER, INC. NAMI BOISE 4696 W. OVERLAND RD STE 272 BOISE ID 83705-2877		ROSEANNE HARDIN 4696 W. OVERLAND RD STE 272 BOISE 83705-2877		
				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	LINDSEY COOK	4696 W. OVERLAND SUITE 272	BOISE	ID	USA	83705-2877
DIRECTOR	SALLY OBERLINDACHER	4696 W. OVERLAND	BOISE	ID	USA	83705-2877
PRESIDENT	ALEX COPPLE	4696 W. OVERLAND ROAD STE:272	BOISE	ID	USA	83705-2877
DIRECTOR	LISA UNDERWOOD	4696 W. OVERLAND RD. STE: 272	BOISE	ID	USA	83705-2877
DIRECTOR	KEN WINER	4696 W. OVERLAND RD., STE. 272	BOISE	ID	USA	83705-2877
TREASURER	RICK SIMON	4696 W. OVERLAND RD. STE: 272	BOISE	ID	USA	83705-2877
5. Organized Under the Laws of: ID C 86464		6. Annual Report must be signed.* Signature: Richard W Simon Name (type or print): Richard W Simon		Date: 04/20/2015 Title: Treasurer		
Processed 04/20/2015		* Electronically provided signatures are accepted as original signatures.				