No. <b>C 55648</b>	Di	Due no later than May 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to:				PATRICIA D WATSON			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed.  CRAIGMONT QUICK RESPONSE RESCUE UNIT, INC.  TIM S DROEGMILLER  BOX 445  CRAIGMONT ID 83523-0445		1134 EVERGREEN RD CRAIGMONT 83523  3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	TIM S DROE BOX 445						
NO FILING FEE IF	CRAIGMONT						
RECEIVED BY DUE DAT	TE						
4. Corporations: Enter Names a	and Business Addresses of	President, Secretary, and Directors. Treas	surer (optional).				
Office Held Nar	me	Street or PO Address	City	State	Country	Postal Code	
TREASURER PAT	TRICIA D WATSON	P.O. BOX 445	CRAIGMONT	ID	USA	83523-0445	
SECRETARY PAT	TRICIA D WATSON	P.O. BOX 445	CRAIGMONT	ID	USA	83523-0445	
PRESIDENT TIM	1 DROEGMILLER	P.O. BOX 445	CRAIGMONT	ID	USA	83523-0445	
5. Organized Under the Laws o	of: 6. Annual Repo	6. Annual Report must be signed.*					
ID	Signature: T	Signature: Timothy S. Droegmiller Date: 04/05/2015				.5	
C 55648	Name (type o	Name (type or print): Timothy S. Droegmiller Title: President					
Processed 04/05/2015 * Electronically provided signatures are accepted as original signatures.							