| No. C 195349 | | Due no later than Jul 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------|---|--|---|-------|---------|-------------|
| Return to: | | Annual Report Form | | CASSANDRA WENNER | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. ELMORE COUNTY FRIENDS FOR RECOVERY COUNCIL, INC. CASSANDRA WENNER 280 E 5TH N | | 1354 SW VERA ST. MOUNTAIN HOME ID 83647 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | #167 MOUNTAIN HOME ID 83647 | | 3. New Registered Agent Signature:* | | | |
| | | ess Addresses of Pr | esident, Secretary, and Directors. Treasure | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| DIRECTOR MICHAEL J | | CRAWFORD | 580 N 8TH E | MOUNTAIN HOME | E ID | USA | 83647 |
| DIRECTOR JANE JETLE | | Y | 218 NE DOMINGO COURT | MOUNTAIN HOME | ID | USA | 83647 |
| DIRECTOR SANDRA SE | | SSIONS | 830 N 9TH E | MOUNTAIN HOME | E ID | USA | 83647 |
| DIRECTOR JIM ESKRIDO | | GE | 240 E 14TH N | MOUNTAIN HOME | ID | USA | 83647 |
| DIRECTOR | CHRISTINE | WATSON | 435 S 10TH E | MOUNTAIN HOME | E ID | USA | 83647 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID | | Signature: Jane Jetley | | Date: 07/29/2016 | | | |
| C 195349 | | Name (type or print): Jane Jetley | | Title: Treasurer | | | |
| Processed 07/29/2016 | | * Electronically pro | vided signatures are accepted as original signal | gnatures. | | | |