

No. C 148026		Due no later than Mar 31, 2014 Annual Report Form		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. SUMMERWIND SKIPPERS, INC. ALLAN R BOSCH PO BOX 2598 BOISE ID 83701		ALLAN R BOSCH 205 N 10TH ST 4TH FL BOISE ID 83702 USA			
						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	
SECRETARY	KATHY MOE	11872 CHINDEN BLVD.	BOISE	ID	USA	83714	
PRESIDENT	KAREN HAY	560 BIGHORN DR.	BOISE	ID	USA	83709	
DIRECTOR	CATHY SMITH	5180 N BROOKFIELD PLACE	BOISE	ID	USA	83713	
DIRECTOR	OSCAR VILLASENOR	3417 QUAIL PLACE	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID C 148026		6. Annual Report must be signed.* Signature: Kathy Moe Name (type or print): Kathy Moe					
		Date: 02/12/2014 Title: Secretary					
Processed 02/12/2014 * Electronically provided signatures are accepted as original signatures.							