| No. C 30598 | | Due no later than Feb 29, 2016 | 2. Registered Agent and Address (NO PO BOX) KEVIN RAMSEY 3587 LIBERTY LN AMERICAN FALLS ID 83211 3. New Registered Agent Signature:* | | | |
|---|--------------------------------|---|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. LAKE CHANNEL CATTLEMEN'S ASSOCIATION, INC. KEVIN RAMSEY PO BOX 41 AMERICAN FALLS ID 83211 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | |
| 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 | Y KEVIN RAMSEY 3587 LIBERTY LN | | AMERICAN FALLS | S ID | USA | 83211 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ID C 30598 | | Signature: kevin ramsey | Date: 02/08/2016 | | | |
| | | Name (type or print): kevin ramsey | Title: secretary | | | |
| Processed 02/08/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | |