

No. C 109417		Due no later than Feb 29, 2016		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. LEWISTON WRESTLING CLUB, INC. AARON LOCKART PO BOX 1926 LEWISTON ID 83501		AARON T LOCKART 1418 14TH AVE LEWISTON ID 83501		
				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	COLE BLEVINS	1013 HEMLOCK DR	LEWISTON	ID	USA	83501
DIRECTOR	MICHELLE OCONNOR	1409 GRELLE AVE	LEWISTON	ID	USA	83501
DIRECTOR	CHRIS BREMER	1918 BIRCH CT	LEWISTON	ID	USA	83501
DIRECTOR	GARTH EVANS	1916 BIRCH CT	LEWISTON	ID	USA	83501
DIRECTOR	WADE HENDREN	28607 TUMBLEWEED LN	SWEET WATER	ID	USA	83540
DIRECTOR	MELISSA DARNALL	1510 BURRELL DRIVE	LEWISTON	ID	USA	83501
DIRECTOR	BRANDON WHITLOCK	3222 9TH STREET	LEWISTON	ID	USA	83501
PRESIDENT	AARON LOCKART	1418 14TH AVE	LEWISTON	ID	USA	83501
VICE PRESIDENT	ROBERTS CODY	1536 CEDAR DR	LEWISSTON	ID	USA	83540
SECRETARY	JOANNA HENDREN	28607 TUMBLEWEED LN	SWEET WATER	ID	USA	83540
5. Organized Under the Laws of: ID C 109417		6. Annual Report must be signed.* Signature: JoAnna Hendren Name (type or print): JoAnna Hendren Date: 01/06/2016 Title: Secretary				
Processed 01/06/2016		* Electronically provided signatures are accepted as original signatures.				