

No. <b>C 144299</b>		<b>Due no later than Jun 30, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  IDAHO EMERGENCY MEDICAL SERVICES CHIEFS ASSOCIATION, INC SCOTT R TUCKER 11118 MOSS LN NAMPA ID 83651-9160		GREG OWEN 11118 MOSS LN NAMPA ID 83651			
						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	
TREASURER	BILL SPENCER	607 WEST MAIN STREET	GRANGEVILLE	ID	USA	83530	
SECRETARY	MARK REKOW	415 EAST MAIN STREET	EMMETT	ID	USA	83617	
PRESIDENT	SCOTT R TUCKER	11118 MOSS LANE	NAMPA	ID	USA	83651-9160	
DIRECTOR	GREG D OWEN	PO BOX 9160	NAMPA	ID	USA	83652-9160	
5. Organized Under the Laws of:  <b>ID</b> <b>C 144299</b>		6. Annual Report must be signed.*  Signature: Scott Tucker Name (type or print): Scott Tucker					
		Date: 07/06/2010 Title: President					
Processed 07/06/2010 * Electronically provided signatures are accepted as original signatures.							