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|--|-----------------|---|-------|---|---------|-------------|--|
| No. C 150458 | | Due no later than Aug 31, 2018 | | 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. EAGLE MIDDLE SCHOOL PTSO, INC. SABRINA FORD (PTO PRESIDENT) 1000 W FLOATING FEATHER RD EAGLE ID 83616 | | TONY D NELSON 1000 W FLOATING FEATHER RD EAGLE ID 83616 | | | |
| | | | | 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 | |
| VICE PRESIDENT | LESLIE ANDERSON | 998 EAST BROOKWOOD | EAGLE | ID | USA | 83616 | |
| PRESIDENT | SABRINA FORD | 944 N WOODSTREAM PL | EAGLE | ID | USA | 83616 | |
| SECRETARY | JILL GIANNABLE | 1582 RIVERSEND CT | EAGLE | ID | USA | 83616 | |
| TREASURER | ANDREA ANDERSON | 934 E COVEY RUN CT | EAGLE | ID | USA | 83616 | |
| 5. Organized Under the Laws of: ID C 150458 | | 6. Annual Report must be signed.* Signature: SABRINA FORD Name (type or print): SABRINA FORD Date: 08/30/2018 Title: PRESIDENT | | | | | |
| Processed 08/30/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |