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| No. C 167148 | | Due no later than May 31, 2015 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 | | 1. Mailing Address: Correct in this box if needed. ELMORE COUNTY UNITED STATES BOWLING CONGRESS INC WILLIAM T BAMBER 235 ALTURAS DR MOUNTAIN HOME ID 83647 USA | | KEVIN GRUPA 250 S 4TH E MOUNTAIN HOME 83647 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 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 | DAVID HAMMARLUND | 111 ABBOTT DR | MOUNTAIN HOME | ID | USA | 83647 | |
| PRESIDENT | WILLIAM T BAMBER | 235 ALTURAS DR | MOUNTAIN HOME | ID | USA | 83647 | |
| TREASURER | PAULA SZAFRANSKI | 2177 NW FRONTAGE ROAD | MOUNTAIN HOME | ID | USA | 83647 | |
| 5. Organized Under the Laws of: ID C 167148 | | 6. Annual Report must be signed.* Signature: PAULA SZAFRANSKI Name (type or print): PAULA SZAFRANSKI | | | | | |
| | | Date: 04/05/2015 Title: Manager/Treasurer | | | | | |
| Processed 04/05/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |