No. <b>C 188283</b>		Due no later than Aug 31, 2011		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			TRACI STEWART			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing	Address: Correct in this box if needed.		544 E WILDE WY GLENNS FERRY ID 83623			
		GLENNS FERRY DISASTER FUND, INC. CINDI WILDE PO BOX 351						
		GLENNS FERRY ID 83623			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses o	f President, Secretary, and Directors. Treas	surer (	optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
DIRECTOR	R PAM JOHNSON		PO BOX 351		<b>GLENNS FERRY</b>	ID	USA	83623
DIRECTOR CINDI WILDE		<b>∃</b>	PO BOX 351		<b>GLENNS FERRY</b>	ID	USA	83623
DIRECTOR	DONNA FAIN		PO BOX 351		<b>GLENNS FERRY</b>	ID	USA	83623
DIRECTOR	MELINDA STERLING		PO BOX 351		GLENNS FERRY	ID	USA	83623
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Cindi Wilde			Date: 06/30/2011			
C 188283		Name (type or print): Cindi Wilde			Title: Director			
Processed 06/30/2011		* Electronically provided signatures are accepted as original signatures.						