

No. C 194919	Due no later than Jun 30, 2017 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. IDAHO FALLS ADULT HOCKEY LEAGUE INC. BRAD BRADY 1445 E LINCOLN RD IDAHO FALLS ID 83401	BRAD BRADY 1445 E LINCOLN RD IDAHO FALLS ID 83401	
		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	BRAD BRADY	2997 BLUEBIRD LN	IDAHO FALLS ID USA 83402
DIRECTOR	KATHY ROBINSON	225 LADINO LN	IDAHO FALLS ID USA 83401
5. Organized Under the Laws of: ID C 194919	6. Annual Report must be signed.* Signature: Brad Brady Date: 07/01/2017 Name (type or print): Brad Brady Title: Sec		
Processed 07/01/2017		* Electronically provided signatures are accepted as original signatures.	