

No. C 90400		Due no later than Sep 30, 2018 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. EMERGENCY NURSES ASSOCIATION SNAKE RIVER CHAPTER INC. SUE MATTISON 1892 W HENDRICKS CT MERIDIAN ID 83646-1326		SUE MATTISON 1892 W HENDRICKS CT MERIDIAN ID 83646-1326			
						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	
PRESIDENT	SHEILA DESILET	5262 N DEBUSSY WAY	MERIDIAN	ID	USA	83642-1823	
TREASURER	SUE MATTISON	1892 W. HENDRICKS CT	MERIDIAN	ID	USA	83646-1326	
5. Organized Under the Laws of: ID C 90400		6. Annual Report must be signed.* Signature: Sue Mattison Name (type or print): Sue Mattison					
		Date: 07/28/2018 Title: Treasurer					
Processed 07/28/2018		* Electronically provided signatures are accepted as original signatures.					