No. C 119348		Due no later than May 31, 2013		2. Registered Agen	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTH IDAHO TOURISM ALLIANCE, INC. SHARON MATTHEWS PO BOX 64 LIBERTY LAKE ID 99019		MIKE SLOAN				
					BONNERS FERRY ID 83805			
				3. New Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pres	sident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DAVID SIMS		PO BOX 149	BONNERS FERRY	ID	USA	83805	
DIRECTOR	RICK SHAFFER		PO BOX 867	WALLACE	ID	USA	83873	
DIRECTOR	ANNIE FREDERICK		P O BOX 162	ST. MARIES	ID	USA	83861	
DIRECTOR	GREG MARSH		P O BOX 804	WALLACE	ID	USA	83873	
DIRECTOR	ALEX HART		10 STATION AVE	KELLOGG	ID	USA	83837	
SECRETARY	ELLEN LARSEN		840 MAIN ST	RATHDRUM	ID	USA	83858	
DIRECTOR	TED RUNBERG		P O BOX 929	PRIEST RIVER	ID	USA	83856	
PRESIDENT	EILEEN KAIN		PO BOX 174	COOLIN	ID	USA	83821	
DIRECTOR	CHARLIE MILLER		105 N. FIRST ST. SUITE 100	COEUR D'ALENE	ID	USA	83814	
DIRECTOR	STEPHANIE SIMS		P O BOX 920	BONNERS FERRY	ID	USA	83805	
DIRECTOR	OR DEB WHEELER		510 E. 6TH AVE	POST FALLS	ID	USA	83854	
DIRECTOR	KATHERINE	COPPOCK	105 N. 1ST ST.	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of: 6. Annual F		6. Annual Report mu	Annual Report must be signed.*					
ID		Signature: Sharon Matthews Date: 03/24/2013						
C 119348		Name (type or print): Sharon Matthews Title: Grant Administrator						
Processed 03/24/2013		* Electronically provi	ded signatures are accepted as original :	signatures.				