No. C 137747		Due no later than Feb 28, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		to the second second to the second	MURRAY JIM SORENSEN			
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.		10 11 10 10 10 10 10 10 10 10 10 10 10 1	181 NW MAIN ST BLACKFOOT ID 83221			
		CARL AND IMAGENE HOEHNER FAMILY FOUNDATION, INC. MURRAY JIM SORENSEN 181 NW MAIN BLACKFOOT ID 83221			BLACKFOOT ID 83221			
				3. <u>New</u> Register	3. New Registered Agent Signature:*			
4. Corporations: Ente	r Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR			7090 RUNNING IRON LN 7090 RUNNING IRON LN	POCATELLO POCATELLO	ID ID	USA USA	83204 83204	
5. Organized Under the Laws of:		6. Annual Report	must be signed.*					
5. Organized Under t	ile Laws or.				Date: 01/30/2017			
5. Organized Under t		Signature: Mur	ray Jim Sorensen	D	ate: 01/30,	/2017		
3			ray Jim Sorensen orint): Murray Jim Sorensen			/2017 tered Agent		