No. <b>C 137747</b>	Due no later than Feb 28, 2014	2. Registered Agent and Address (NO PO BOX)			
Return to: Annual Report Form		MURRAY JIM SORENSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  CARL AND IMAGENE HOEHNER FAMILY FOUNDATION, INC.  MURRAY JIM SORENSEN  181 NW MAIN	181 NW MAIN ST BLACKFOOT ID 83221			
NO FILING FEE IF RECEIVED BY DUE DATE	BLACKFOOT ID 83221 USA	3. New 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 IMAGENE I DIRECTOR CARL HOE		POCATELLO POCATELLO	ID ID	USA USA	83204 83204
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Murray Jim Sorensen	Date: 12/16/2013			
C 137747	Name (type or print): Murray Jim Sorensen	Title: Registered Agent			
Processed 12/16/2013	* Electronically provided signatures are accepted as original signatures.				