

No. C 142390		Due no later than Jan 31, 2017		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. WA-ID VOLUNTEER CENTER, INC. CATHY ROBINSON 1424 MAIN ST LEWISTON ID 83501		CATHY ROBINSON 1424 MAIN ST LEWISTON ID 83501		
				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	ALICE WHITE	P.O. BOX 82	CLARKSTON	WA	USA	99403
VICE PRESIDENT	CARL KERRICK	604 9TH ST	LEWISTON	ID	USA	83501-0896
TREASURER	KATHY SMOLINSKI	1316 29TH STREET	LEWISTON	ID	USA	83501-0896
DIRECTOR	DONNA CALLAHAN	LCSC, 500 8TH STREET	LEWISTON	ID	USA	83501-0896
DIRECTOR	TIM BARKER	PARKS & RECREATION DEPT. 1424 MAIN STREET	LEWISTON	ID	USA	83501-0896
DIRECTOR	JIM FULLER	ASOTIN COUNTY COMMISSIONER P.O. BOX 250	ASOTIN	WA	USA	99402
5. Organized Under the Laws of: ID C 142390		6. Annual Report must be signed.* Signature: Linda R. Vacura Name (type or print): Linda R. Vacura Date: 11/21/2016 Title: Financial Manager				
Processed 11/21/2016		* Electronically provided signatures are accepted as original signatures.				