| No. C 200115 | | Due no later than Oct 31, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|------------------------------|---|------------------|---|---------|-------------|--|
| Return to: | | Annual Report Form | ANN WHEELER | ANN WHEELER | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | POWI ANN 543 E AMER | 1. Mailing Address: Correct in this box if needed. POWER COUNTY VICTIM ADVOCATES, INC. ANN WHEELER 543 BANNOCK AVE AMERICAN FALLS ID 83211-1200 | | 543 BANNOCK AVE AMERICAN FALLS ID 83211-1200 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DAT | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held Nam | ne | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT ANN WHEELER 543 BANNOCK AVE | | 543 BANNOCK AVE. | AMERICAN FALLS | S ID | USA | 83211-1200 | |
| 5. Organized Under the Laws o | f: 6. Annu | al Report must be signed.* | | | | | |
| ID | Signa | ature: Ann Wheeler | Date: 08/17/2015 | | | | |
| C 200115 | Name | e (type or print): Ann Wheeler | Title: President | | | | |
| Processed 08/17/2015 | * Electro | * Electronically provided signatures are accepted as original signatures. | | | | | |