

No. <b>C 36110</b>		<b>Due no later than Jan 31, 2018 Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  BOUNDARY VOLUNTEER AMBULANCE SERVICE, INCORPORATED JEFFREY LINDSEY PO BOX 441 BONNERS FERRY ID 83805 USA		JEFFREY LINDSEY 6447 RAILROAD ST BONNERS FERRY ID 83805			
						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	
TREASURER	STEVE RUSSELL	411 SYRINGA DR	BONNERS FERRY	ID	USA	83805	
PRESIDENT	JEFFREY LINDSEY	18 SWEETGRASS LN	SANDPOINT	ID	USA	83864	
DIRECTOR	JIM PAULUS	282 CALVARY LANE	NAPLES	ID	USA	83847	
DIRECTOR	NANCY RUSSELL	411 SYRINGA DR.	BONNERS FERRY	ID	USA	83805	
DIRECTOR	RAUL LOPEZ	6531 TANNENBAUM	BONNERS FERRY	ID	USA	83805	
DIRECTOR	KEN ENGLISH	1955 ROSSEVELT ST.	MOYIE SPRINGS	ID	USA	83847	
DIRECTOR	WANDA WILKERSON	32 STARLIGHT RD	NAPLES	ID	USA	83845	
SECRETARY	LYDIA BETHKE	1187 OXFORD RD	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of:  <b>ID C 36110</b>		6. Annual Report must be signed.*  Signature: Jeffrey Lindsey Name (type or print): Jeffrey Lindsey					
		Date: 12/07/2017 Title: President					
Processed 12/07/2017      * Electronically provided signatures are accepted as original signatures.							