No. C 53772		Due no la	2. Registered	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. SALMON LIBRARY ASSOCIATION, INC. RAMONA COMBS-STAUFFER 300 MAIN ST. SALMON ID 83467		300 MAIN S SALMON II	RAMONA COMBS-STAUFFER 300 MAIN STREET SALMON ID 83467 3. New Registered Agent Signature:*			
4. Corporations: Enter Nam	es and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR DIRECTOR	AMY BERASI DAVID LEWIS JOHN SKRILETZ SEAN BASCOM FRANCES MUELLER		26 SEVENTEEN MILE RD PO BOX 26 435 WITHINGTON CREEK RD 1520 ROOSEVELT AVE 10 SUMMER CREEK	SALMON SALMON SALMON SALMON SALMON	ID ID ID ID	USA USA USA USA USA	83467 83467 83467 83467 83467	
5. Organized Under the Laws of: 6. Annual Report must Signature: Linda Haws of:		6. Annual Report must be Signature: Linda Harl	pe signed.* krader	JALHON	Date: 05/2	2/2018	03107	
C 53772 Name (type or print): Linda Harkrader Title: Financial Adv Processed 05/22/2018 * Electronically provided signatures are accepted as original signatures.								