

No. <b>C 119905</b>		<b>Due no later than Jun 30, 2013</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> IDAHO DIABETES YOUTH PROGRAMS, INC. NATALIE DELRIO 1701 N 12TH ST BOISE ID 83702-2713 USA		LAURA COLSON 1701 N 12TH BOISE ID 83702		
				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
SECRETARY	NEILL GOODFELLOW	8156 N PENN	FRUITLAND	ID	USA	83619
DIRECTOR	ALAN BEAN	872 W. BOGUS VIEW DR.	EAGLE	ID	USA	83616
VICE PRESIDENT	RICHARD CHRISTENSEN	2356 PARKSIDE DR	BOISE	ID	USA	83712
DIRECTOR	VICKI CUTSHALL	3423 MEADOW DR	BOISE	ID	USA	83706
TREASURER	LYNN GIESLER	9493 CHADWICK DRIVE	BOISE	ID	USA	83704
PRESIDENT	NATALIE BENNION DELRIO	2621 SPENCER RD	CHEVY CHASE	MD	USA	20815
5. Organized Under the Laws of:  <b>ID C 119905</b>		6. Annual Report must be signed.* Signature: Lisa Gier Name (type or print): Lisa Gier Date: 05/17/2013 Title: Executive Director				
Processed 05/17/2013		* Electronically provided signatures are accepted as original signatures.				