

No. C 31822		Due no later than May 31, 2009 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. CLEARWATER HISTORICAL SOCIETY, INC. (THE) BERNICE PULLEN PO BOX 1454 OROFINO ID 83544		BERNICE PULLEN 315 COLLEGE AVE OROFINO ID 83544		
				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
DIRECTOR	BRIAN MCGOLDRICK	PO BOX 661	OROFINO	ID	USA	83544
DIRECTOR	LIN CANNELL	11680 HARTFORD AVE	OROFINO	ID	USA	83544
DIRECTOR	PERK LYDA	PO BOX 264	OROFINO	ID	USA	83544
TREASURER	SELAH LEGUS	12576 VISTA AVE	OROFINO	ID	USA	83544
SECRETARY	DONNA HEIEREN	4041 EUKIKI RIDGE RD	OROFINO	ID	USA	83544
PRESIDENT	NICK R ABLERS	12752 LAQA AVE	OROFINO	ID	USA	83544
5. Organized Under the Laws of: ID C 31822		6. Annual Report must be signed.* Signature: Bernice C. Pullen Name (type or print): Bernice C. Pullen Date: 03/13/2009 Title: Museum Director				
Processed 03/13/2009		* Electronically provided signatures are accepted as original signatures.				