| No. C 124136 | | Due no later than May 31, 2009 2. Registered Agent and Address (NO PO BOX) | | | | | PO BOX) | |
|--|---|--|---|---|--|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. COEUR D'ALENE AREA SWIM TEAM, INC. BRENDA ERICKSON PO BOX 846 POST FALLS ID 83877 | | 701 FRONT AVI COEUR D'ALENE | JANET D ROBNETT 701 FRONT AVE #101 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4 Corporations: Enter Names and Busine | | ess Addresses of F | resident, Secretary, and Directors. Treasu | rer (ontional) | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| SECRETARY TREASURER PRESIDENT | BECKY BUELL BRENDA ERICKSON SHERRY KANANOWICZ | | PO BOX 846 PO BOX 846 24248 E. DESMET | POST FALLS POST FALLS, ID. LIBERTY LAKE | ID | USA USA USA | 83877 83877 99019 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID C 124136 | | Signature: Brenda Erickson Name (type or print): Brenda Erickson | | | Date: 03/25/2009 Title: Treas | | | |
| Processed 03/25/2009 | * Electronically provided signatures are accepted as original signatures. | | | | | | | |