No. C 33891		Due no later than Aug 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. BLAINE COUNTY HISTORICAL MUSEUM, INC. (THE) BOB MACLEOD P. O. BOX 124 218 N MAIN HAILEY ID 83333-0124			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				TEDDIE DALEY 218 N MAIN HAILEY ID 83333-0124 3. New Registered Agent Signature:*				
4. Corporations: Enter	Names and Busin	ess Addresses	of President, Secretary, and Directors. Treas	surer (d	optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
TREASURER	KELLI YOUNG	3	BOX 1561		HAILEY	ID	USA	83333
SECRETARY	JANE ROSEN	1	BOX 3271		HAILEY	ID	USA	83333
PRESIDENT	BOB MACLEO	OD	BOX 961		HAILEY	ID	USA	83333
DIRECTOR	TEDDIE D. I	DALEY	BOX 3484		HAILEY	ID	USA	83333
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 33891		Signature: Bob Macleod			Date: 06/21/2016			
		Name (type or print): Bob Macleod			Title: PRESIDENT			
Processed 06/21/2016		* Electronically provided signatures are accepted as original signatures.						