

| | | | | | | |
|--|----------------|--|---------|--|---------|-------------|
| No. C 74745 | | Due no later than Jan 31, 2016 | | 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. CHAPTER #25, DISABLED AMERICAN VETERANS DEPARTMENT OF IDAHO, INCORPORATED KENNETH H SMITH PO BOX 179 NEWPORT WA 99156-0179 | | BEN WHITE 2 HOLLEY GLEN WEST PRIEST RIVER ID 83856 | | |
| | | | | 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 |
| PRESIDENT | FRANK BLEISNER | P.O. BOX 532 | NEWPORT | WA | USA | 99156 |
| SECRETARY | KEN SMITH | P. O. BOX 179 | NEWPORT | WA | USA | 99156-0179 |
| 5. Organized Under the Laws of: ID C 74745 | | 6. Annual Report must be signed.* Signature: Ken Name (type or print): Ken Date: 02/17/2016 Title: Smith | | | | |
| Processed 02/17/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |