No. <b>C 174300</b>		Due no later than Jul 31, 2017			2. Registered Agent and Address (NO 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.  SNAKE RIVER CHAPTER OF S H R M, INC. CAROL ANDERSON P.O. BOX 2312 TWIN FALLS ID 83303-2312		282 TW	ELIABETH D MACK 2822 E 3200 N TWIN FALLS ID 83301-8334  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		acc Addrascas of Pro	sident Secretary and Directors Treat	surer (option	(ontional)			
Office Held	Name	css Addresses of Tre	Street or PO Address	City	ui).	State	Country	Postal Code
PRESIDENT SECRETARY TREASURER	CAROL ANDERSON SONYA HAINES KATRINA OKSTEN		941 WEST 100 SOUTH 102 MAIN AVE E #5 PO BOX 1238		N FALLS N FALLS	ID ID ID	USA USA USA	83347 83301 83303-1238
5. Organized Under the Laws of:  ID  C 174300		6. Annual Report must be signed.* Signature: CAROL ANDERSON Name (type or print): CAROL ANDERSON			Date: 06/12/2017 Title: PRESIDENT			
Processed 06/12/2017		* Electronically provided signatures are accepted as original signatures.						