

No. C 133516		Due no later than Apr 30, 2013		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. IDAHO ASSOCIATION OF NURSE ANESTHETISTS, INC. LISA A MUNGER 2384 E. RAGUSA ST. MERIDIAN ID 83642 USA		LISA PRITIKEN 2384 E. RAGUSA ST. MERIDIAN ID 83642		
				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	KIT R DUBOIS	1218 W. HIGHLAND VIEW DR	BOISE	ID	USA	83702
SECRETARY	LISA A MUNGER	2384 E. RAGUSA ST.	MERIDIAN	ID	USA	83642
DIRECTOR	TALOR K NELSON	PO BOX 543	DRIGGS	ID	USA	83422
DIRECTOR	WYNN SPERRY	3404 RIVA RIDGE WAY	BOISE	ID	USA	83709
DIRECTOR	PAUL DICKINSON	1115 8TH AVE E.	JEROME	ID	USA	83338
5. Organized Under the Laws of: ID C 133516		6. Annual Report must be signed.* Signature: Lisa Munger Name (type or print): Lisa Munger Date: 03/05/2013 Title: CRNA, SecretaryTreasurer IDANA				
Processed 03/05/2013		* Electronically provided signatures are accepted as original signatures.				