

No. <b>C 146710</b>		<b>Due no later than Dec 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> NATIONAL WILDFIRE EDUCATION CENTER AND MUSEUM, INC. DENNIS O'BRIEN 413 CEDAR ST PO BOX 469 WALLACE ID 83873		DENNIS O'BRIEN 413 CEDAR ST WALLACE ID 83873		
				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
DIRECTOR	JAMES SEE	107 CEDAR ST	WALLACE	ID	USA	83873
DIRECTOR	ROBIN STANLEY	PO BOX 268	SILVERTON	ID	USA	83867
DIRECTOR	DALE B LAVIGNE	PO BOX 2170	OSBURN	ID	USA	83849
DIRECTOR	JOHN AMONSON	106 W 6TH	SILVERTON	ID	USA	83867
DIRECTOR	JON CANTAMESSA	97 CREEKSIDE ROAD	WALLACE	ID	USA	83873
DIRECTOR	MICHAEL ALLDREDGE	P.O. BOX 663	WALLACE	ID	USA	83873
DIRECTOR	DAN WHITING	610 HUBBARD STE 121	COEUR D'ALENE	ID	USA	83814
DIRECTOR	R W CARON	416 1/2 SIXTH STREET, #4	WALLACE	ID	USA	83873
SECRETARY	DENNIS O'BRIEN	PO BOX 146	WALLACE	ID	USA	83873
PRESIDENT	JAMES SEE	107 CEDAR STREET	WALLACE	ID	USA	83873
5. Organized Under the Laws of:  <b>ID C 146710</b>		6. Annual Report must be signed.* Signature: Dennis O'Brien Name (type or print): Dennis O'Brien  Date: 10/28/2015 Title: Secretary				
Processed 10/28/2015		* Electronically provided signatures are accepted as original signatures.				