No. C 119365		Due no later than May 31, 2014		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			GARY WOODY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SHOSHONE COUNTY FOOD BANK, INC. JO ANN GROVES PO BOX 85			317 EMERALD DR KELLOGG ID 83837			
NO FILING FEE IF RECEIVED BY DUE DATE		KELLOGG ID 83837 USA		3.	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Presid	lent, Secretary, and Directors. Treas	urer (opt	tional).			
Office Held	Name		Street or PO Address	C	City	State	Country	Postal Code
DIRECTOR	KELLIE LAVIO	GNE	BOX 328	S	SILVERTON	ID	USA	83867
DIRECTOR	OR JUDY ROUNDS		700 BANK ST. SUITE 110	V	VALLACE	ID	USA	83873
PRESIDENT	SIDENT GARY WOODY		317 EMERALD DR.	K	ŒLLOGG	ID	USA	83837
SECRETARY	TARY JO ANN GROVES		902 S DIVISION	V	VARDNER	ID	USA	83837
DIRECTOR	OR GAIL NEARING		BOX 504	P	INEHURST	ID	USA	83850
DIRECTOR	SANDRA NEARING BOX 511 PINEHURST ID USA 83850						83850	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jo Ann Groves			Date: 03/31/2014			
C 119365		Name (type or print): Jo Ann Groves			Title: Secretary			
Processed 03/31/2014 * Electronically provided signatures are accepted as original signatures.								