

No. C 60683	Due no later than Mar 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 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form	FRED SCOTT 19 BRANSON DR LOWMAN ID 83637	
	1. Mailing Address: Correct in this box if needed. LOWMAN AMBULANCE, INC. CINDY REKOW 8002 HWY 21 LOWMAN ID 83637	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
TREASURER	DEE PHELPS	6 SCENIC CIR	LOWMAN ID USA 83637
SECRETARY	CHRISTINE WAGNER	44 RIVER FRONT ROAD	LOWMAN ID USA 83637
VICE PRESIDENT	CINDY REKOW	60 MARANATHA	LOWMAN ID USA 83637
PRESIDENT	FRED SCOTT	19 BRANSON DRIVE	LOWMAN ID USA 83637
5. Organized Under the Laws of: ID C 60683	6. Annual Report must be signed.* Signature: Christine Wagner Name (type or print): Christine Wagner		Date: 02/23/2017 Title: Secretary
Processed 02/23/2017	* Electronically provided signatures are accepted as original signatures.		