

No. C 145958	Due no later than Oct 31, 2014 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. ANIMAL HALF-WAY HOUSE INC. SANDRA L PUCKETT BOX 129 MCCAMMON ID 83250	SANDRA L PUCKETT 331 E MERRILL RD MCCAMMON ID 83250				
		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	DELAINA NUNES	329 E. MERRILL RD	MCCAMMON	ID	USA	83250
DIRECTOR	MARTY BOWMAN	5779 SO. MARSH CREEK RD	MCCAMMON	ID	USA	83250
DIRECTOR	SHAUNENE HADDOCK	305 SOUTH CENTER	MCCAMMON	ID	USA	83250
5. Organized Under the Laws of: ID C 145958	6. Annual Report must be signed.* Signature: Sandra L Puckett Name (type or print): Sandra L Puckett		Date: 09/20/2014 Title: President			
Processed 09/20/2014		* Electronically provided signatures are accepted as original signatures.				