

No. C 194971		Due no later than Jun 30, 2015		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. TENSED AMBULANCE SERVICE, INCORPORATED LEANN DAMAN PO BOX 6 306 HAWK LANE TENSED ID 83870-0006		LEANN DAMAN 1586 SHEEP CREEK ROAD DESMET 83824			
				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	PAUL DAMAN	1586 SHEEP CREEK ROAD	TENSED	ID	USA	83824	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 194971		Signature: Leann Daman				Date: 04/18/2015	
		Name (type or print): Leann Daman				Title: Business Manager	
Processed 04/18/2015		* Electronically provided signatures are accepted as original signatures.					