

|                                                                                                                                                        |                      |                                                                                                                                                                |       |                                                            |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|------------------|--|
| No. <b>C 181828</b>                                                                                                                                    |                      | <b>Due no later than Feb 29, 2016</b>                                                                                                                          |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                      | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>NATIONAL CHARIOT ASSOCIATION, INC.<br>AMANDA WILKINS<br>398 N 3846 E<br>RIGBY ID 83442<br>USA |       | MELISSA BERNARD<br>246 N YELLOWSTONE HWY<br>RIGBY ID 83442 |         |                  |  |
|                                                                                                                                                        |                      |                                                                                                                                                                |       | 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      |  |
| SECRETARY                                                                                                                                              | NIKKI TOBIAS         | 3912 E 500 N                                                                                                                                                   | RIGBY | ID                                                         | USA     | 83442            |  |
| PRESIDENT                                                                                                                                              | KELLY STEVEN STATHAM | 3912 E 500 N                                                                                                                                                   | RIGBY | ID                                                         | USA     | 83442            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                      | 6. Annual Report must be signed.*                                                                                                                              |       |                                                            |         |                  |  |
| <b>ID<br/>C 181828</b>                                                                                                                                 |                      | Signature: Amanda Wilkins                                                                                                                                      |       |                                                            |         | Date: 03/30/2016 |  |
|                                                                                                                                                        |                      | Name (type or print): Amanda Wilkins                                                                                                                           |       |                                                            |         | Title: Treasurer |  |
| Processed 03/30/2016                                                                                                                                   |                      | * Electronically provided signatures are accepted as original signatures.                                                                                      |       |                                                            |         |                  |  |