No. <b>C 45670</b>		Due no later than Jun 30, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  SUN VALLEY ELKHORN ASSOCIATION, INC. MARLENE LOWRY P.O. BOX 1708 SUN VALLEY ID 83353 USA		2. Registered Age	2. Registered Agent and Address (NO PO BOX)  MARLENE LOWRY  HARKER CENTER, ELKHORN  SUN VALLEY ID 83353			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE								
				3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter	Names and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	JAMES S G	ORRINGE	P O BOX 746	BELLEVUE	WA	USA	98009	
DIRECTOR	JOHN HAASI	E	P. O. BOX 452	SUN VALLEY	ID	USA	83353	
DIRECTOR	HARRY E GI	RIFFITH	POBOX 2534	SUN VALLEY	ID	USA	83353	
VICE PRESIDENT	PETER PETE	ERSEN	730 E HIGHLAND VIEW DRIVE	BOISE	ID	USA	83702	
SECRETARY	NANCY AUS	EKLIS	PO BOX 6292	SUN VALLEY	ID	USA	83354	
DIRECTOR	MARGARET WALKER		P. O. BOX 603	SUN VALLEY	ID	USA	83353	
DIRECTOR	JAMES MONGER		PO BOX 908	SUN VALLEY	ID	USA	83353	
PRESIDENT IRA SHEPARD		PO BOX 1142	KETCHUM	ID	USA	83340		
DIRECTOR	ANGELA MA	BON	10568 BLYTHE AVE	LOS ANGELES	CA	USA	90064	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Marlene Lowry		Date: (	Date: 05/05/2014			
C 45670		Name (type or print): Marlene Lowry		Title: General Manager				
Processed 05/05/2014		* Electronically provided signatures are accepted as original signatures.						