

No. C 125713		Due no later than Sep 30, 2012		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. LEADORE EMERGENCY VOLUNTEERS, INC. [object HTMLInputElement] RIES PO BOX 117 LEADORE ID 83464		ALETA RIES 401 SO RAILROAD ST LEADORE ID 83464		
				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	SNYDER RANDEL	P.O. BOX 49	LEMHI	ID	USA	83465
DIRECTOR	JAMES B PLAYFAIR	P.O. BOX 38	LEMHI	ID	USA	83465
DIRECTOR	ROBERT BATES	P.O. BOX 38	LEADORE	ID	USA	83464
TREASURER	ALETA M RIES	P.O. BOX 68 401 SOUTH RAILROAD STREET	LEADORE	ID	USA	83464
DIRECTOR	RICHARD W SNYDER	P.O. BOX 25	LEMHI	ID	USA	83465
SECRETARY	ALETA M RIES	P.O. BOX 68 401 SOUTH RAILROAD STREET	LEADORE	ID	USA	83464
PRESIDENT	MICHAEL E RIES	P.O. BOX 68 401 SOUTH RAILROAD STREET	LEADORE	ID	USA	83464
5. Organized Under the Laws of: ID C 125713		6. Annual Report must be signed.* Signature: Aleta Ries Name (type or print): Aleta Ries Date: 07/28/2012 Title: Secretary/Treasurer				
Processed 07/28/2012		* Electronically provided signatures are accepted as original signatures.				