

4:761

Due no later than February 29, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

HORSESHOE BEND AREA CHAMBER OF COMM
PO BOX 216
HORSESHOE BEND, ID 83629DONNA J HANSON
8 HILLVIEW LANE
HORSESHOE BEND, ID 83629

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

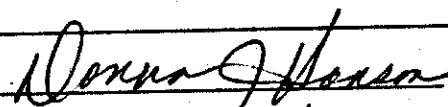
Office held	Name	Street or P.O. Address	City	State	Zip
President	Steve DeWeese	109 #3 Adam St	Horseshoe Bend	Idaho	83629
Vice President	Shawn F. Surgeon	103 Madison Ave	Horseshoe Bend	Idaho	83629
Treasurer	Donna Hanson	8 Hillview Ln.	Horseshoe Bend	ID	83629
Secretary	Laurie Lloyd	105 Riverside	Horseshoe Bend	Id	83629
Board member	Garth Baldwin	459 Hwy 55	Horseshoe Bend	Id	83629

5. Organized Under the Laws of:

IDAHO
C 142761

6.

Signature



Date 2-28-2008

Name (Typed or Printed)

Donna J. Hanson

Title

Treasurer

Issued 12/03/2007

Do Not Tape or Staple

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