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Due no later than Febr ry 29, 2008
Annual Report Form

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

NO FILING FEE IF RECEIVED BY DUE DATE

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

HORSESHOE BEND AREA CHAMBER OF COMM
PO BOX 216
HORSEWHOE BEND, ID 83629

2. I gent and Office NO PO BOX

DONNA J HANSON
8 HILLVIEW LANE
HORSESHOE BEND, ID 83629

3. New Registered Agent Signature

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
Treasure	Donna Hanson	8 Hillview Dr.	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 Donna J Hanson Date 2-28-2008
Name (Typed or Printed) Donna J. Hanson Title Treasure

Issued 12/03/2007

Do Not Tape or Staple

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