

No. C 90401		Due no later than Sep 30, 2013 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. EMERGENCY NURSES ASSOCIATION IDAHO STATE COUNCIL INC. DENNIS EMERSON 3011 USTICK CIRCLE BOISE ID 83704-6101		DENNIS EMERSON, RN 3011 USTICK CIRCLE BOISE ID 83704-6101		
				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	COREY JOHNSON	131 HUMBIRD DR.	SANDPOINT	ID	USA	83864
DIRECTOR	MIKE LARSON	802 19TH ST	LEWISTON	ID	USA	83501-6101
TREASURER	SUE MATTISON	1892 HENDRICKS CT	MERIDIAN	ID	USA	83642-6101
PRESIDENT	DENNIS E EMERSON	3011 N. USTICK CIRCLE	BOISE	ID	USA	83704-6101
DIRECTOR	HEATHER MORROW	1009 TEARE RD	MOSCOW	ID	USA	83843-7449
5. Organized Under the Laws of: ID C 90401		6. Annual Report must be signed.* Signature: Dennis Emerson Name (type or print): Dennis Emerson Date: 08/18/2013 Title: President 2014-15				
Processed 08/18/2013		* Electronically provided signatures are accepted as original signatures.				