No. <b>C 90401</b>		Due no later than Sep 30, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		No. of the control of	SUE MATTISON 1892 W HENDRICKS CT MERIDIAN ID 83646-1326  3. New Registered Agent Signature:*			
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. SUE MATTISON 1892 W HENDRICKS CT MERIDIAN ID 83646-1326		JNCIL				
4. Corporations: Enter Na	mes and Busin	ess Addresses o	f President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	COREY JOHNSON		131 HUMBIRD DR.	SANDPOINT	ID	USA	83864	
PRESIDENT	TRACI MCGI		2564 KUNA RD	KUNA	ID	USA	83634-1232	
TREASURER DIRECTOR	SUE MATTIS	The same of the sa	1892 HENDRICKS CT 1009 TEARE RD	MERIDIAN MOSCOW	ID ID	USA USA	83642-6101 83843-7449	
BIRLETOR	TIE (TIEIC IT	Olikow	1003 TEINE NE	110000	10	05/1	030137113	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 90401		Signature: Sue Mattison			Date: 07/18/2015			
		Name (type or print): Sue Mattison			Title: Treasurer			
Processed 07/18/2015		* Electronically	provided signatures are accepted as origina	al signatures.				