No. <b>C 174300</b>		D	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		CONTRACTOR NO. CO. CO. CO. CO. CO. CO. CO. CO. CO. C	ELIABETH D MACK 2822 E 3200 N TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SNAKE RIVER CHAPTER OF S H R M, INC. REBEKAH S YANCEY P.O. BOX 2312 TWIN FALLS ID 83303-2312		N - 2000 CO - M - M - 1000 CO				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER CAROL ANDE		ERSON	941 WEST 100 SOUTH	PAUL	ID	USA	83347	
PRESIDENT REBEKAH S			1259 GALENA DRIVE	TWIN FALLS	ID	USA	83301	
SECRETARY SONYA HAINES			941 WEST 100 SOUTH	PAUL	ID	USA	83347	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 174300		Signature: Rebekah S. Yancey			Date: 06/02/2016			
		Name (type or print): Rebekah S. Yancey			Title: President			
Processed 06/02/2016 * Electronically provided signatures are accepted as original signatures.								