No. C 163622		Due no later than Nov 30, 2017	2. Registered Agent and Address (NO PO BOX) BOBBI DEITZ 406 S. TIMBER LN POST FALLS ID 83854 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form				
		1. Mailing Address: Correct in this box if needed. POST FALLS VOLLEYBALL CLUB, INC. JEFF DEITZ 406 S. TIMBER LN POST FALLS ID 83854				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter	Names and Busin	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JEFF DEITZ	406 S. TIMBER LN	POST FALLS	ID	USA	83854
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Jeff Deitz	Date: 09/18/2017			
C 163622		Name (type or print): Jeff Deitz	Title: Director			
Processed 09/18/2017 * Electronically provided signatures are accepted as original signatures.						