| No. <b>C 84317</b>                                                                                                         |                                                                           | Due no later than Jul 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  SOUTHWESTERN IDAHO DESERT RACING ASSOCIATION INCORPORATED SCOTT WILLIAMS 10350 W SKYCREST DR BOISE ID 83704-1957 USA |                                                       | 2. Registered A            | 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 |                                                                           |                                                                                                                                                                                                                             |                                                       | 26372 RIVER<br>WILDER ID   | MARK VENTUA 26372 RIVERVIEW DR WILDER ID 83676  3. New Registered Agent Signature:* |                   |                         |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).          |                                                                           |                                                                                                                                                                                                                             |                                                       |                            |                                                                                     |                   |                         |  |
| Office Held N                                                                                                              | lame                                                                      |                                                                                                                                                                                                                             | Street or PO Address                                  | City                       | State                                                                               | Country           | Postal Code             |  |
| SECRETARY M                                                                                                                | SCOTT WILLIAMS<br>MEL WHITE<br>MATT GEROSIN                               |                                                                                                                                                                                                                             | P.O. BOX 313<br>3413 COACHMAN CT.<br>3280 N. CURT DR. | BOISE<br>NAMPA<br>MERIDIAN | ID<br>ID<br>ID                                                                      | USA<br>USA<br>USA | 83701<br>83687<br>83646 |  |
| 5. Organized Under the Laws of:                                                                                            |                                                                           | 6. Annual Report must be signed.*                                                                                                                                                                                           |                                                       |                            |                                                                                     |                   |                         |  |
| ID<br>C 84317                                                                                                              |                                                                           | Signature: So                                                                                                                                                                                                               |                                                       | Date: 06/08/2015           |                                                                                     |                   |                         |  |
|                                                                                                                            |                                                                           | Name (type o                                                                                                                                                                                                                |                                                       | Title: President           |                                                                                     |                   |                         |  |
| Processed 06/08/2015                                                                                                       | * Electronically provided signatures are accepted as original signatures. |                                                                                                                                                                                                                             |                                                       |                            |                                                                                     |                   |                         |  |