No. C 207251			e no later than Sep 30, 2016	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		PAMELA S	PAMELA SCHANK 2293 N OLD LACE AVE			
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. KUNA HIGH BOYS BASKETBALL BOOSTERS, INC PAMELA SCHANK 2293 N OLD LACE AVE KUNA ID 83634		**************************************				
				KUNA ID 83634 3. New Registered Agent Signature:*				
4. Corporations: Enter Names	and Busine	ess Addresses of	President, Secretary, and Directors. Treasure	er (optional).				
Office Held Na	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR PAMELA SCH			1577 N LINDER AVE MB 158	KUNA	ID	USA	83634	
	L JOHNSC		2581 W CERULEAN DR	KUNA	ID		83634	
DIRECTOR BEG	CKY ROGE	RS	4324 W SADDLE RIDGE DR	KUNA	ID		83634	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 207251		Signature: Pa		Date: 08/01/2016				
		Name (type o		Title: Director				
Processed 08/01/2016	* Electronically provided signatures are accepted as original signatures.							