

No. C 119348		Due no later than May 31, 2012		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		Annual Report Form		MIKE SLOAN 7232 MAIN ST BONNERS FERRY ID 83805			
		1. Mailing Address: Correct in this box if needed. NORTH IDAHO TOURISM ALLIANCE, INC. SHARON MATTHEWS PO BOX 64 LIBERTY LAKE ID 99019		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JAME DAVIS	510 E. 6TH AVE	POST FALLS	ID	USA	83854	
DIRECTOR	KATHERINE COPPOCK	105 N. 1ST ST.	COEUR D'ALENE	ID	USA	83814	
PRESIDENT	MICHAEL SLOAN	PO BOX 149	BONNERS FERRY	ID	USA	83805	
DIRECTOR	RICK SHAFFER	PO BOX 867	WALLACE	ID	USA	83873	
DIRECTOR	ANNIE FREDERICK	P O BOX 162	ST. MARIES	ID	USA	83861	
DIRECTOR	GREG MARSH	P O BOX 804	WALLACE	ID	USA	83873	
DIRECTOR	ALEX HART	10 STATION AVE	KELLOGG	ID	USA	83837	
DIRECTOR	ELLEN LARSEN	840 MAIN ST	RATHDRUM	ID	USA	83858	
DIRECTOR	TED RUNBERG	P O BOX 929	PRIEST RIVER	ID	USA	83856	
DIRECTOR	EILEEN KAIN	PO BOX 174	COOLIN	ID	USA	83821	
DIRECTOR	CHARLIE MILLER	105 N. FIRST ST. SUITE 100	COEUR D'ALENE	ID	USA	83814	
DIRECTOR	CAROL GRAHAM	P O BOX 920	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of: ID C 119348		6. Annual Report must be signed.* Signature: Sharon Matthews Name (type or print): Sharon Matthews					
		Date: 03/13/2012 Title: Grant Administrator					
Processed 03/13/2012		* Electronically provided signatures are accepted as original signatures.					