						
_{No.} С 47394			2. Registered Agent and Office (NOT A P.O. BOX)			
Return to:	Annual Report Form			ROYCE LEE		
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720	Mailing Address: Correct in this box if needed. BONNEVILLE HUMANE SOCIETY, INC.		502 S WOODRUFF AVE IDAHO FALLS ID 83401			
BOISE, ID 83720-0080	PO BOX 2763 IDAHO FALLS ID 83403		3. <u>New</u> Registered Agent Signature.			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Nam	nes and Business Addresses	of President, Secretary, Director) Treasurer.	na Booksi G- Jo	
Office Held Nar		Street or PO Address	City	4.400.000000000000000000000000000000000	ntry Postal Code	
President K	aryn Johnson		Idaho		8340 <u>6</u> 83404	
	Amy Harckel	1945 Santalema Or	Fdaho F		•	
. سا	Nancia Morriss	ey 1597 Stanger Dr.	Idaho	Falls, Id		
•	Reba Lockma		: Idaho F	ialls, Id	83404	
Board Member	Connie Morishita	695 Clarence Dr.	Idaho	Falls Id	83402	
5. Organized Under the Laws	of: 6. Signature:	n Bolmith			Date: 3 - 29-1/	
IDAHO C 47394	Name (type or prin	D: Cynthia Smith			Title: Bookkeeper	
Issued 03/22/2011 by DK1					13257	
1530E0 03/22/2011 by DR1					·· · · · · · · · · · · · · · · · · · ·	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a **new** registered agent must sign in Block 3.