

No. C 84583		Due no later than Aug 31, 2015 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. NATIONAL INDIAN CHILD WELFARE ASSOCIATION, INC. SARAH KASTELIC 5100 SW MACADAM AVE., STE 300 PORTLAND OR 97239		PATRICIA CARTER-GOODHEART 28022 OVER THE HILL DR LAPWAI ID 83540			
				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	
TREASURER	GARY PETERSON	NORTH 1110 HWY. 106	SKOKOMISH NATION	WA	USA	98584	
SECRETARY	ROCHELLE ETTAWAGESHIK	5453 HUGHSTON RD.	HARBOR SPRINGS	MI	USA	49740	
PRESIDENT	GIL VIGIL	ROUTE 42, BOX 360	SANTE FE	NM	USA	87506	
5. Organized Under the Laws of: OR C 84583		6. Annual Report must be signed.* Signature: Matthew Scott Name (type or print): Matthew Scott					
Date: 08/19/2015 Title: Director of Operations							
Processed 08/19/2015		* Electronically provided signatures are accepted as original signatures.					