No. C 45787		Due no later than Jul 31, 2011		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE		Annual Report Form 1. Mailing Address: Correct in this box if needed.		ALAN CAMERON 2770 VISTA AVENUE				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		LEAGUE SERVICES, INC. KATHY N THOMSON P. O. BOX 5158		BOISE ID 83705				
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83705 USA		3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Presi	ident, Secretary, and Directors. Treasurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	ALAN D CAMERON		2770 S VISTA AVENUE PO BOX 5158	BOISE	ID	USA	83705	
DIRECTOR	SHANE BERGER		1087 ERIKSON DRIVE PO BOX 40	REXBURG	ID	USA	83440	
DIRECTOR	MELANIE DELASHMUTT		1880 GARRETT WAY	POCATELLO	ID	USA	83201	
TREASURER	JON ANDERSON		1321 OAKLEY AVE, STE 10	BURLEY	ID	USA	83318	
DIRECTOR	CHERI SCHAAFS		421 11TH AVENUE SOUTH PO BOX 309	NAMPA	ID	USA	83653	
DIRECTOR	CHRIS LOSETH		654 SOUTHWAY PO BOX 897	LEWISTON	ID	USA	83501	
DIRECTOR	LINDA CHATFIELD		1410 N GOVERNMENT WAY	COEUR D'ALENE	ID	USA	83814	
DIRECTOR	KARMA SAM	IARTINO	7615 W RIVERSIDE DR	GARDEN CITY	ID	USA	83714	
5. Organized Under the Laws of: 6. Annu		6. Annual Report mus	Annual Report must be signed.*					
ID C 45787		Signature: Kathy N Thomson		Date: 05/18/2011				
		Name (type or print): Kathy N Thomson		Title: Vice President				
Processed 05/18/2011		* Electronically provid	ed signatures are accepted as original signa	itures.				