No. C 140604 Return to:		Due no later than Sep 30, 2009 Annual Report Form		2. Registered Age	Registered Agent and Address (NO PO BOX) KONNI S PETERSEN			
				KONNI S PETE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CARIBOU COUNTY SENIOR CITIZEN CENTER, INC. KONNI S PETERSEN 60 S MAIN		60 S MAIN SODA SPRINGS	60 S MAIN SODA SPRINGS ID 83276			
NO FILING FEE IF RECEIVED BY DUE DATE		SODA SPRINGS ID 83276 USA		3. <u>New</u> Registered	3. New Registered Agent Signature:*			
4. Corporations: Ente	r Names and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DOUG HOGA	N	289 NORTH 3RD EAST	SODA SPRINGS	ID	USA	83276	
DIRECTOR	JERRY BUSH	l	162 NORTH 100 EAST	SODA SPRINGS	ID	USA	83276	
DIRECTOR	JAY KIDD		P.O. BOX 394	SODA SPRINGS	ID	USA	83276	
DIRECTOR	CTOR ED PARISE		189 MCARTHUR	SODA SPRINGS	ID	USA	83276	
DIRECTOR	DIRECTOR DORIS IRVING		P.O. BOX 946	SODA SPRINGS	ID	USA	83276	
PRESIDENT	TODD HUNZ	EKER	P.O. BOX 851	SODA SPRINGS	ID	USA	83276	
TREASURER	JOANN RHODES		85 SOUTH 7TH EAST	SODA SPRINGS	ID	USA	83276	
SECRETARY			480 SOUTH 3RD EAST	SODA SPRINGS	ID	USA	83276	
DIRECTOR	GLORIA EVA	NS	160 KEYSTONE	SODA SPRINGS	ID	USA	83276	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jo		Date: 08/05/2009				
C 140604		Name (type or print): Joann Rhodes Title: Treasurer						
Processed 08/05/200	9	* Electronically	provided signatures are accepted as original	signatures.				