No. C 200412		Due	2. Registered Ag	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO FALLS FIRE MUSEUM INC. P.O. BOX 50162 IDAHO FALLS ID 83405 3. New Registered Agent Signature:*					
4. Corporations: Enter Names		ess Addresses of Pr	resident, Secretary, and Directors. Treas	urer (ontional)			
200 00 0	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR LANCE JOHNSON DIRECTOR KAAREN PARSONS DIRECTOR MEISHA JOHNSON		4400 E. SUNDANCE CIRCLE 647 SHOUP AVE 4400 E. SUDANCE CIRCLE	IDAHO FALLS IDAHO FALLS IDAHO FALLS	ID ID ID	USA USA USA	83406 83402 83406	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 200412		Signature: Land Name (type or p		Date: 10/14/2017 Title: Director			
Processed 10/14/2017 * Electronically provided signatures are accepted as original signatures.							