

No. C 67930		Due no later than Sep 30, 2013		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SHOSHONE COUNTY WOMEN'S RESOURCE CENTER, INC. KEISHA L. OXENDINE 415 7TH SUITE #1 WALLACE ID 83873		KELLIE LAVIGNE 415 7TH SUITE #1 WALLACE ID 83873			
				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	
PRESIDENT	MITZI SCHEEL	415 7TH SUITE 1	WALLACE	ID	USA	83873	
TREASURER	PEGGY DELANGE-WHITE	BOX 308	KINGSTON	ID	USA	83839	
5. Organized Under the Laws of: ID C 67930		6. Annual Report must be signed.* Signature: Kellie Lavigne Name (type or print): Kellie Lavigne Date: 07/16/2013 Title: Executive Director					
Processed 07/16/2013		* Electronically provided signatures are accepted as original signatures.					