

|                                                                                                                                                        |              |                                                                                                                                              |        |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------|---------|-------------|--|
| No. <b>C 179915</b>                                                                                                                                    |              | <b>Due no later than Aug 31, 2017</b>                                                                                                        |        | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MACKAY LIONS CLUB, INC.<br>LENIE WILKIE<br>3919 W 4300 N<br>MACKAY ID 83251 |        | LEONARD WALL<br>400 S MAIN<br>MACKAY ID 83251      |         |             |  |
|                                                                                                                                                        |              |                                                                                                                                              |        | 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                                                                                                                                              | LENIE WILKIE | 3919 W 4300 N                                                                                                                                | MACKAY | ID                                                 | USA     | 83251       |  |
| PRESIDENT                                                                                                                                              | DEAN WALL    | PO BOX 522                                                                                                                                   | MACKAY | ID                                                 | USA     | 83251       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 179915</b>                                                                                          |              | 6. Annual Report must be signed.*<br>Signature: Lenie Wilkie<br>Name (type or print): Lenie Wilkie                                           |        |                                                    |         |             |  |
|                                                                                                                                                        |              | Date: 10/02/2017<br>Title: Treasurer                                                                                                         |        |                                                    |         |             |  |
| Processed 10/02/2017                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                    |        |                                                    |         |             |  |