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| No. C 102676 | | Due no later than Jul 31, 2009 | | 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 | | REED H MILLER 1084 N SKYLINE DR IDAHO FALLS ID 83402 | | | |
| | | 1. Mailing Address: Correct in this box if needed. E.I.R.M.C. OFFICE ASSOCIATION, INC. DONALD J ORMOND 1084 N SKYLINE DR PO BOX 1814 IDAHO FALLS ID 83403-1814 | | 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 | DONALD J ORMOND | 1084 N SKYLINE DR | IDAHO FALLS | ID | USA | 83402 | |
| DIRECTOR | J. KEITH ORMOND | 1084 N SKYLINE DR | IDAHO FALLS | ID | USA | 83402 | |
| SECRETARY | REED H MILLER | 1084 N SKYLINE DR | IDAHO FALLS | ID | USA | 83402 | |
| 5. Organized Under the Laws of: ID C 102676 | | 6. Annual Report must be signed.* Signature: Reed H. Miller Name (type or print): Reed H. Miller Date: 05/18/2009 Title: Secretary/Director | | | | | |
| Processed 05/18/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |