

|  |                    |   |               |   |         |             |  |
|--|--------------------|---|---------------|---|---------|-------------|--|
| No. <b>C 55293</b>   |                    | <b>Due no later than Mar 31, 2016</b>   |               | <b>2. Registered Agent and Address (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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>NORTH BENCH VOLUNTEER FIRE DISTRICT, INC.<br>GREG MEAD - - - - -<br>P.O. BOX 1234<br>BONNERS FERRY ID 83805 |               | GREG MEAD<br>51 DAVID THOMPSON DR<br>BONNERS FERRY ID 83805 |         |             |  |
|  |                    |   |               | 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 |  |
| DIRECTOR   | MARCIAVEE COSSETTE | 29 SERENETY LANE  | BONNERS FERRY | ID  | USA     | 83805       |  |
| TREASURER  | GREG MEAD          | 116 BENCH ROAD  | BONNERS FERRY | ID  | USA     | 83805       |  |
| PRESIDENT  | WALT KIRBY         | BOX 1042  | BONNERS FERRY | ID  | USA     | 83805       |  |
| VICE PRESIDENT   | WALTER BURROWS     | 407 FAWN LANE   | BONNERS FERRY | ID  | USA     | 83805       |  |
| DIRECTOR   | MICHAEL KRALIK     | PO BOX V  | BONNERS FERRY | ID  | USA     | 83805       |  |
| DIRECTOR   | LYNDA FLORAVANTI   | 664 MEADOW CREEK ROAD   | BONNERS FERRY | ID  | USA     | 83805       |  |
| SECRETARY  | LEN PINE           | 1283 HOMESTEAD LOOP   | BONNERS FERRY | ID  | USA     | 83805       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 55293</b>   |                    | 6. Annual Report must be signed.*<br>Signature: Deborah Youngwirth<br>Name (type or print): Deborah Youngwirth<br>Date: 02/16/2016<br>Title: CPA  |               |   |         |             |  |
| Processed 02/16/2016   |                    | * Electronically provided signatures are accepted as original signatures.   |               |   |         |             |  |