

No. C 163622	Due no later than Nov 30, 2015 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. POST FALLS VOLLEYBALL CLUB, INC. JEFF DEITZ 406 S. TIMBER LN POST FALLS ID 83854		BOBBI DEITZ 406 S. TIMBER LN POST FALLS ID 83854			
			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	JEFF DEITZ	406 S. TIMBER LN	POST FALLS	ID	USA	83854
VICE PRESIDENT	CARRIE MINDEN	3130 N. WILDFIRE ST	POST FALLS	ID	USA	83854
5. Organized Under the Laws of: ID C 163622	6. Annual Report must be signed.* Signature: Jeff Deitz Name (type or print): Jeff Deitz		Date: 10/23/2015 Title: Director			
Processed 10/23/2015		* Electronically provided signatures are accepted as original signatures.				