

No. C 52561		Due no later than Dec 31, 2012		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. OASIS PLANNING COUNCIL, INC. SISTER ANTHONY MARIE GREVING 214 E CENTER POCATELLO ID 83201 USA		SHARON STURM 214 E CENTER POCATELLO ID 83201		
				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	SUSIE STRICKER	353 NORTH 4TH AVENUE	POCATELLO	ID	USA	83201
DIRECTOR	SHARON D STURM	501 NORTH MAPLE STREET	BLACKFOOT	ID	USA	83221
DIRECTOR	MELISSA HARTMAN	921 SOUTH 8TH AVENUE, STOP 8095	POCATELLO	ID	USA	83209
DIRECTOR	LOIS CLUFF	455 HAYES STREET	AMERICAN FALLS	ID	USA	83211
DIRECTOR	DALE MCFARLAND	BOX 322	LAVA HOT SPRINGS	ID	USA	83246
TREASURER	DEBBY DAY	640 PERSHING AVENUE, #A	POCATELLO	ID	USA	83201
SECRETARY	CHERIE NELSON	1901 ALVIN RICKEN DRIVE	POCATELLO	ID	USA	83201
PRESIDENT	BOBBIE BRANCH	801 BITTERROOT DRIVE	POCATELLO	ID	USA	83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 52561		Signature: Sister Anthony Marie Greving			Date: 10/16/2012	
		Name (type or print): Sister Anthony Marie Greving			Title: Area Agency on Aging Director	
Processed 10/16/2012		* Electronically provided signatures are accepted as original signatures.				