No. <b>C 184497</b>		Due no later than Sep 30, 2018		2. Registered Age	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.  EMT & FIRE TRAINING INC.  TRAVIS HOLYCROSS 209 SHADY PINES LP PRIEST RIVER ID 83856		TRAVIS HOLY	TRAVIS HOLYCROSS 209 SHADY PINES LP PRIEST RIVER ID 83856  3. New Registered Agent Signature:*			
				3. <u>New</u> Registered				
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR VICE PRESIDENT PRESIDENT	RYAN ASHEI ADAM KNIGH ARTHUR S TRAVIS W	-IT REASOR	11668 N WATERFORD LOOP 17628 N CIRCLE S TRAIL 209 SHADYPINES LOOP 209 SHADYPINES LOOP	HAUSER RATHDRUM PRIEST RIVER PRIEST RIVER	ID ID ID ID	USA USA USA USA	83854 83858 83856 83856	
5. Organized Under the Laws of:  ID  C 184497		6. Annual Report must be signed.* Signature: Lani Meek Name (type or print): Lani Meek			Date: 08/01/2018 Title: Business Manager			
Processed 08/01/2018 * Electronically provided signatures are accepted as original signatures.								