

No. C 51249		Due no later than Apr 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. MEDICINE LODGE CATTLE ASSOCIATION, INC. LYNN H HOGGAN 2060 MEDICINE LODGE RD DUBOIS ID 83423		LYNN HOGGAN 2060 MEDICINE LODGE RD DUBOIS ID 83423		
				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	DAVID HOGGAN	1968 E 1800 N	HAMER	ID	USA	83425
DIRECTOR	MATT HOGGAN	2060 MEDICINE LODGE RD	DUBOIS	ID	USA	83423
DIRECTOR	MARLOWE GOBLE	2380 N 400 E SUITE G	NORTH LOGAN	UT	USA	83431
SECRETARY	LYNN H HOGGAN	2060 MEDICINE LODGE RD	DUBOIS	ID	USA	83423
PRESIDENT	KARL TAYLOR	559 TYSON AVE.	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID C 51249		6. Annual Report must be signed.* Signature: Matthew D. Hoggan Name (type or print): Matthew D. Hoggan Date: 05/28/2015 Title: Director				
Processed 05/28/2015		* Electronically provided signatures are accepted as original signatures.				