No. C 31503	1	r than Jan 31, 2011 Report Form	BOX)	2. Registered Agent and Office (NOT A P.O. BOX)			
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 1. Mailing Address: Corr LEMHI COUNTY HIST POSE SCORUM 10 210 MAIN SALMON ID 83467		ect in this box if needed. ORICAL SOCIETY, INC. per Benedict	357 DIAI SALMON	SALMON ID 83467 3. New Registered Agent Signature.			
NO FILING FEE IF RECEIVED BY DUE DATE		. (,	,			
4. Corporations: Enter Names	and Business Addresses of Pres	ident, Secretary, Directors and (opti-	onal) Treasurer.		•		
Office Held Nam	ie	Street or PO Address	City	State	Country	Postal Code	
President He	ope Benedict	P.O. Box 909	Selmon	10	1184	8346-1	
i i i i i i i i i i i i i i i i i i i	wrie Ruggiero	P.O Box 73	Salmon	20	K.SA	83467	
Sucretary Eli	Zabeth RitaN	609 Hope AVE 357 DIAMOND CIKRY	Solmer	ID	us4	83467	
Treasurer Dall	ashewis	357 DIAMOND CIKKY		6		83467	
Teustee Cha	rles Kane, dr.	204 Front Street	Salman			83467	
	e) Waidely	601 Lamburd Street	Salmor	AD.	Usa	83461	
5. Organized Under the Laws of IDAHO	of: 6. Signature:	ope Rendiet			Date:	12/29/201	
C 31503	Name (type or prin	t): Hope Benedic	+		Title:	President	
Issued 12/22/2010 by LJC		,				115351	
	INSTRUCTIONS FO	R THE IDAHO ANNUA	I REPORT	FORM		133331	
•				· VIXI1			
Block 1: Entity name may n not given in Block 1, strike it or	ot be altered through the usual transfer and write in the correct address.	se of this form. Pay special attentions. Note: To ensure future mailing.	on to the mailing a s, the corrected ac	iddress. If ti Idress mus i	he correct m t be inside B	ailing address is łock 1.	
Block 2: To change the register agent must be at a street address.	ered agent or office, strike the ites in Idaho; not a Post Offic	incorrect information and write in the e Box or Personal Mail Box.	e correct informati	on. Note: T	The office of	the registered	
Block 3: Only a <u>new</u> registere	ed agent must sign in Block 3.						
Riock 4: Enter names and hus	iness addresses of president o	ocreton, and directors Notes Do no	d nud ⁿ oama ao l	act 200="	"	ahara*	

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>Do not put "same as last year" or "same as above"</u>. These will not be accepted. Changes here will not affect the address in Block 1. Be sure to include the title for each name listed.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the Corporation is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the Corporation to terminate the legal existance. If you have any questions contact the Commercial Division at (208) 334-2301.

17 Trustee	Dave Call	POSTMARK DATES WILL NOT BE ACCEPTED	Sulmon	Idaho	USA 8346	7
Tauster	Dale Ford	P.O. BOQ 181 544 ANY 93 South	Salman	Idaho	U84 834	7
Trustee	Clona Jakovac	544 Avy 93 South	Salma	Idaho	UA 8346	1
Trustee	Bob Russeil	5 Sims Runchland	Salmin	Steho	WA 8396	7