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|--|----------------|--|---------------|--|---------|-------------|--|
| No. C 146129 | | Due no later than Nov 30, 2009 | | 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. CLARK FORK-PEND OREILLE CONSERVANCY, INC. CHARLTON MILLS PO BOX 814 SANDPOINT ID 83864 | | JAMES C WATKINS 523 HOPE AVE HOPE ID 83836 | | | |
| | | | | 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 | |
| TREASURER | DIANE WILLIAMS | 307 N. 2ND ST., SUITE 12 | SANDPOINT | ID | USA | 83864 | |
| SECRETARY | NAT HALL | P. O. BOX 1469 | NOXON | MT | USA | 59863 | |
| DIRECTOR | KATHY COUSINS | 250 KATHLEEN AVENUE | COEUR D'ALENE | ID | USA | 83814 | |
| PRESIDENT | KYLER WOLF | 200 MAIN STREET | SANDPOINT | ID | USA | 83864 | |
| 5. Organized Under the Laws of: ID C 146129 | | 6. Annual Report must be signed.* Signature: Kyler Wolf Name (type or print): Kyler Wolf Date: 09/22/2009 Title: President | | | | | |
| Processed 09/22/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | | |