


No. C 63448	Due no later than March 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BINGHAM CRISIS CENTER FOR WOMEN, IN 34 LOUELLA ST BLACKFOOT, ID 83221		DIXIE CHAPMAN 34 LOUELLA BLACKFOOT, ID 83221												
			3. New Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td colspan="6" style="height: 150px; vertical-align: top;"> Attached </td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Attached					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Attached															
5. Organized Under the Laws of: IDAHO C 63448		6. Signature  Date <u>1/15/08</u> Name <small>(Typed or Printed)</small> <u>Dixie Chapman</u> Title <u>Ex. Director</u>													

Issued 01/02/2008

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<i>OFFICE</i>	<i>NAME</i>	<i>ADDRESS</i>	<i>CITY</i>	<i>STATE</i>	<i>ZIP</i>
President	Susan Nalley	501 N. Maple	Blackfoot	ID	83221
Vice-President	Dr. Bryce Moser	145 Walden	Blackfoot	ID	83221
Secretary	Bonnie Hatch	34 Louella Street	Blackfoot	ID	83221
Treasurer	Linda Mansanarez	34 Louella Street	Blackfoot	ID	83221
Executive Director	Dixie Chapman	34 Louella Street	Blackfoot	ID	83221