No. <b>C 150638</b>		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ONE MINISTRIES INC. SARAH C MURRAY 4507 N HUNTERCREST DR		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				4507 N HUNTI COEUR D'ALEI	SARAH MURRAY 4507 N HUNTERCREST DR COEUR D'ALENE ID 83815-9674  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine				urar (optional)	(ontional)			
Office Held Nam		233 Addi C33C3 Of TTC3IdC	Street or PO Address	City	State	Country	Postal Code	
	MICHAEL J MURRAY SARAH C MURRAY		4507 N HUNTERCREST DR 4507 N HUNTERCREST DR	COEUR D'ALENE COEUR D'ALENE	E ID	USA USA	83815-9674 83815-9674	
5. Organized Under the Laws of:		6. Annual Report must						
ъ		Signature: Sarah C I		Date: 06/17/2013				
C 150638		Name (type or print)		Title: Secretary				
rocessed 06/17/2013 * Electronically provided signatures are accepted as original signatures.								