SECRETARY OF STA	\TF		Annual Donart 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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PALOUSE PATHWAYS INC MARGARET JENKINS 1120 KOUSE ST MOSCOW ID 83843		1120 KOUSE MOSCOW	MARGARET C JENKINS 1120 KOUSE ST MOSCOW 83843 3. New Registered Agent Signature:*			
		ess Addresses of	President, Secretary, and Directors. Treas Street or PO Address	urer (optional). City	State	Country	Postal Code	
DIRECTOR TREASURER DIRECTOR DIRECTOR SECRETARY PRESIDENT	NANCY DERI JEANNE GAY MONIQUE LI IVAR NELSO BARBARA RO GRETCHEN N	'LER ILLARD IN OSE	321 N BLAINE ST 839 NYLAROL 820 B ST E 1ST ST 2243 MOSER ST 1043 BLUE HERON LN	MOSCOW MOSCOW MOSCOW MOSCOW MOSCOW MOSCOW	ID ID ID ID ID ID	Country	83843 83843 83843 83843 83843 83843	
5. Organized Under the Laws of: ID C 200341		6. Annual Report must be signed.* Signature: Margaret Jenkins Name (type or print): Margaret Jenkins * Electronically provided signatures are accepted as original signatures.*			Date: 12/15/2014 Title: Founder Director			