| No. <b>C 15508</b>  |                  | Due no later than May 31, 2010   |                      | 2. Registered Agent and Address (NO PO BOX)      |  |       |         |             |
|---|------------------|--|----------------------|--|--|-------|---------|-------------|
| Return to:  |                  | Annual Report Form   |                      | MARVIN REICHERT<br>73 W 100 N<br>RUPERT ID 83350 |  |       |         |             |
| 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.   |                      |  |  |       |         |             |
|   |                  | TRINITY EVANGELICAL LUTHERAN CHURCH OF RUPERT,<br>MINIDOKA COUNTY, IDAHO<br>REICHERT MARVIN<br>909 8TH STREET<br>RUPERT ID 83350 |                      |  |  |       |         |             |
|   |                  |  |                      |  | 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 |
| DIRECTOR  | GARY HOLY        |  | PO BOX 512           |  | RUPERT                                     | ID    | USA     | 83350       |
| TREASURER   | TAMMI LEONI      |  | 883 W 400 S          |  | RUPERT                                     | ID    | USA     | 83350       |
| SECRETARY   | JOLENE VAHSHOLTZ |  | 298 W 300 S          |  | HEYBURN                                    | ID    | USA     | 83336       |
| PRESIDENT   | DON PATES        |  | PO BOX 180           |  | RUPERT                                     | ID    | USA     | 83350       |
| 5. Organized Under the Laws of:   |                  | 6. Annual Report must be signed.*  |                      |  |  |       |         |             |
| ID  |                  | Signature: Christine Short   |                      | Date: 03/12/2010                                 |  |       |         |             |
| C 15508   |                  | Name (type or print): Christine Short  |                      |  | Title: Office Administor                   |       |         |             |
| Processed 03/12/2010 * Electronically provided signatures are accepted as original signatures.                    |                  |  |                      |  |  |       |         |             |