

No. <b>C 49370</b>		<b>Due no later than Apr 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		BARBARA KOVACS 6635 LINCOLN BONNERS FERRY ID 83805-1639		
		<b>1. Mailing Address: Correct in this box if needed.</b> SENIORS HOSPITALITY CENTER, INC. ATTN BARBARA KOVACS PO BOX 1639 6635 LINCOLN ST BONNERS FERRY ID 83805-1639 USA		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	JIM WILSON	512617 HIGHWAY 95	BONNERS FERRY	ID	USA	83805
TREASURER	VALDIE BURKHOLDER	6468 COMANCHE STREET	BONNERS FERRY	ID	USA	83805
DIRECTOR	LILA NAVARRO	6848 EISENHOWER STREET	BONNERS FERRY	ID	USA	83805
DIRECTOR	JAMES HUBBELL	371 DIAMOND ROAD	BONNERS FERRY	ID	USA	83805
DIRECTOR	PATRICIA OLSON	523 BLUE SKY ROAD	BONNERS FERRY	ID	USA	83805
PRESIDENT	ROBERT SABOE	6723 BUCHANAN STREET	BONNERS FERRY	ID	USA	83805
VICE PRESIDENT	ROBERT SPALDING	6968 BUFFALO STREET	BONNERS FERRY	ID	USA	83805
SECRETARY	LAVON WILLIAMS	6181 HEMLOCK STREET	BONNERS FERRY	ID	USA	83805
DIRECTOR	LARRY HIGGINS	5903 MAIN STREET	BONNERS FERRY	ID	USA	83805
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
<b>ID C 49370</b>		Signature: BARBARA KOVACS		Date: 02/23/2016		
		Name (type or print): BARBARA KOVACS		Title: ADMINISTRATION		
Processed 02/23/2016		* Electronically provided signatures are accepted as original signatures.				