| No. <b>C 207319</b>   |          | to the state of th |                        | 2. Registere       | 2. Registered Agent and Address (NO PO BOX)   |         |             |  |
|---|----------|--|------------------------|--------------------|---|---------|-------------|--|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |          | Annual Report Form  1. Mailing Address: Correct in this box if needed.  RISEN SON PRAYER COMMUNITY, INC.  19550 N LONE PINE LN  RATHDRUM ID 83858  |                        | 19550 N<br>RATHDRI | REV. GORDON MAYNARD 19550 N LONE PINE LN RATHDRUM ID 83858  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine      |          | ess Addresses of F   |                        |                    |   |         |             |  |
| Office Held   | Name     |  | Street or PO Address   | City               | State   | Country | Postal Code |  |
| DIRECTOR  | GORDON E | MAYNARD  | 19550 N LONE PINE LANE | RATHDRUI           | 4 ID  | USA     | 83858       |  |
| 5. Organized Under the Laws of:   |          | 6. Annual Report must be signed.*  |                        |                    |   |         |             |  |
| ID<br>C 207319  |          | Signature: gor   |                        | Date: 09/19/2016   |   |         |             |  |
|   |          | Name (type or  |                        | Title: director    |   |         |             |  |
| Processed 09/19/2016  |          | * Electronically provided signatures are accepted as original signatures.  |                        |                    |   |         |             |  |