No. C 79506 Return to:		Due no later than Sep 30, 2016 Annual Report Form		2. Registered A	Registered Agent and Address (NO PO BOX) MIKE LOCKNANE			
				MIKE LOCKN				
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.			1712 9TH STREET S. NAMPA ID 83651			
		LIFELINE CRISIS PREGNANCY CENTER, INCORPORATED RICHARD HOGABOAM 1323 12TH AVENUE SOUTH NAMPA ID 83651			3. New Registered Agent Signature:*			
				o				
4. Corporations: Enter N	lames and Busin	ess Addresses of Pr	resident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DAN BUCK		901 MAIN ST	CALDWELL	ID	USA	83605	
SECRETARY	PAMELA MILLER		3227 KADEN DRIVE	NAMPA	ID	USA	83686	
TREASURER	MICHAEL S LOCKNANE		1712 9TH ST SO	Nampa	ID	USA	83651	
DIRECTOR	HEATHER CONDER		12223 W. CLOVERWOOD CT.	BOISE	ID	USA	83713	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
ID C 79506		Signature: Richard Hogaboam		Dat	Date: 10/27/2016			
		Name (type or print): Richard Hogaboam		Title: Executive Director				
Processed 10/27/2016	* Electronically provided signatures are accepted as original signatures.							