No. <b>C 159729</b>	D	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form			BUTCH VEENSTRA 3425 N 3400 E KIMBERLY ID 83341			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. LIVING WORD CHRISTIAN FELLOWSHIP, INC. ALEX H VAUGHN 233 MAIN AVE E TWIN FALLS ID 83301		1000 K 2000 K NOVEMBER 1000 C				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
			3. <u>New</u> Registere	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Busi	ness Addresses of	President, Secretary, and Directors. Treasur	er (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR MICHAEL K WARREN		453 1/2 3RD AVE NORTH	TWIN FALLS	ID	USA	83301	
SECRETARY BRIDGETT L SLATER		828 CAMPUS DR	TWIN FALLS	ID	USA	83301	
PRESIDENT ALEX H VA	AUGHN	828 CAMPUS DR	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: 6. Annual Rep		rt must be signed.*					
<b>ID</b> Signature: Bridgett		ridgett Slater		Date: 05/05/2008			
C 159729	C 159729 Name (type or print): Bridgett Slater		Title: Secretary				
Processed 05/05/2008	* Electronically provided signatures are accepted as original signatures.						