

No. C 86705	Annual Report Form 1995 Due No Later Than November 30,	2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct  SHEPHERD OF THE MOUNTAINS LJ 212 NORTH HIGHWAY 55 WILLIAM LEAF P. O. BOX 37	WILLIAM LEAF P. O. BOX 671 CASCADE ID 83611
* FIRST NOTICE *	CASCADE ID 83611	3. Organized Under the Laws of:  ID C 86705

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	JACK PHIPPEN	10149 Timberrun Dr	CASCADE	ID	83611
V. PRES.	ARCHIE BANBURY	180 DUFFERS LANE	CASCADE	ID	83611
SECRETARY	D.E. CURTIS	156 SOSLIN LOOP	CASCADE	ID	83611
TREAS	RONN JULIAN	516 OLD STATE HWY	CASCADE	ID	83611
MODER	WM. LEAF	P.O. Box 671	CASCADE	ID	83611

5. NATURE OF BUSINESS  CHURCH	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>William Leaf</u> Date <u>Aug 21, '96</u> Name (Typed or Printed) <u>William Leaf</u> Title <u>Elder</u>
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ISSUED: 07-06-1996

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