

No. 3860	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Due No Later Than November 1, 1991		TOD D. BROWN																									
	1. Mailing Address: Please Correct If Not Correct		303 FEDERAL WAY																									
	ROMAN CATHOLIC DIOCESE OF B		BOISE ID 83705																									
	TOD D. BROWN		3. Incorporated Under The Laws																									
	P. O. BOX 769		of ID																									
	BOISE ID 83701		NO: 003860																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td colspan="5">This is a sole director corporation</td> </tr> <tr> <td>Secretary:</td> <td colspan="5"></td> </tr> <tr> <td>Directors:</td> <td>Tod D. Brown</td> <td>303 Federal Way</td> <td>Boise</td> <td>Idaho</td> <td>83705</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	This is a sole director corporation					Secretary:						Directors:	Tod D. Brown	303 Federal Way	Boise	Idaho	83705
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President:	This is a sole director corporation																											
Secretary:																												
Directors:	Tod D. Brown	303 Federal Way	Boise	Idaho	83705																							
5. Nature of Business Religious		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature</td> <td><u>Tod D. Brown</u></td> <td>Date</td> <td><u>7-12-91</u></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Tod D. Brown</td> <td>Title</td> <td>Director</td> </tr> </table>			Signature	<u>Tod D. Brown</u>	Date	<u>7-12-91</u>	Name (Typed or Printed)	Tod D. Brown	Title	Director																
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