No. C 119638		Due no later than May 31, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. POMERELLE INSTITUTE, INC. SONDRA J ANDERSON PO BOX 155 ALBION ID 83311 USA		2. Registered	2. Registered Agent and Address (NO PO BOX) SONDRA J ANDERSON 975 PARKE LN ALBION ID 83311 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				3. <u>New</u> Registo				
4. Corporations: Enter	Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	SONDRA J	ANDERSON	975 PARKE LANE	ALBION	ID	USA	83311-8331	
PRESIDENT	LEX KUNAU		PO BOX 548	BURLEY	ID	USA	83318-8331	
TREASURER	DON WEST	FALL	1329 ALBION AVE	BURLEY	ID	USA	83318-8331	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Sor		Date: 05/20/2012				
C 119638		Name (type or		Title: Secretary				
Processed 05/20/2012	!	* Electronically pro	ovided signatures are accepted as origin	al signatures.				