

No. C 17694	Due no later than Dec 31, 2017 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: 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. IDAHO INSTITUTE OF CHRISTIAN EDUCATION, INC. (THE) JOHN POOL 822 ELM MOSCOW ID 83843	JULIE COYLE 822 ELM STREET MOSCOW ID 83843				
		3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	NORMAN FOWLER	3293 FOOTHILL RD	MOSCOW	ID	USA	83843
SECRETARY	PATTI HEATH	PO BOX 9881	TROY	ID	USA	83871
TREASURER	THOMAS RICHARDSON	PO BOX 8508	MOSCOW	ID	USA	83843
VICE PRESIDENT	TOM STROSCHEIN	1464 ALPOWA AVE	MOSCOW	ID	USA	83843
5. Organized Under the Laws of: ID C 17694	6. Annual Report must be signed.* Signature: John S Pool Name (type or print): John S Pool		Date: 12/06/2017 Title: Office Manager			
Processed 12/06/2017		* Electronically provided signatures are accepted as original signatures.				