

| No. C 112118 | | Due no later than Sep 30, 2014 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. SAFE PLACE MINISTRIES, INC. ANGELA HILLS 723 N MITCHELL ST STE 101 BOISE ID 83704 | | KAPRI WALSH 723 N MITCHELL ST STE 101 BOISE ID 83704 | | | |
| | | | | | | 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 | |
| DIRECTOR | PAM NICHOLS | 1609 THORN CREEK COURT | NAMPA | ID | USA | 83686 | |
| SECRETARY | BARBARA BUCHANAN | 10838 SOUTHERLAND DRIVE | BOISE | ID | USA | 83709 | |
| PRESIDENT | DAVE FORREY | 5301 W. AMITY ROAD | NAMPA | ID | USA | 83687 | |
| DIRECTOR | LISA BYCE | 9878 W. EDNA STREET | BOISE | ID | USA | 83704 | |
| VICE PRESIDENT | BRIAN GRASSLEY | 2043 E. REDWICK CT. | MERIDIAN | ID | USA | 83646 | |
| 5. Organized Under the Laws of: ID C 112118 | | 6. Annual Report must be signed.* Signature: Angela Hills Name (type or print): Angela Hills | | | | | |
| | | Date: 07/28/2014 Title: Support Services Manager | | | | | |
| Processed 07/28/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |