

No. C 79506		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. LIFELINE CRISIS PREGNANCY CENTER, INCORPORATED DIANE HUTER 1323 12TH AVENUE SOUTH NAMPA ID 83651		MIKE LOCKNANE 1712 9TH STREET S. NAMPA ID 83651			
						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	DAN BUCK	901 MAIN ST	CALDWELL	ID	USA	83605	
SECRETARY	PAMELA MILLER	3227 KADEN DRIVE	NAMPA	ID	USA	83686	
TREASURER	MICHAEL S LOCKNANE	1712 9TH ST SO	NAMPA	ID	USA	83651	
DIRECTOR	BEVERLY J VERNER	745 W WILDRYE CT	NAMPA	ID	USA	83686	
5. Organized Under the Laws of: ID C 79506		6. Annual Report must be signed.* Signature: Michael S locknane Name (type or print): Michael S locknane					
		Date: 07/15/2014 Title: Treasurer					
Processed 07/15/2014 * Electronically provided signatures are accepted as original signatures.							