No. C 73285  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		D	ue no later than Jul 31, 2010	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
		Annual Report Form  1. Mailing Address: Correct in this box if needed.  COMMUNITY ASSISTANCE LEAGUE, INCORPORATED SHAWNA PARRY TREASURER P. O. BOX 1361 SANDPOINT ID 83864 USA		8403 SAGLE I SAGLE ID 8	BARBARA BUCHANAN 8403 SAGLE RD SAGLE ID 83860  3. New Registered Agent Signature:*			
l. Corporations: Enter	Names and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	SHAWNA M PARRY		1176 GRANITE RIDGE DR	SANDPOINT	ID	USA	83864-8386	
SECRETARY			726 LAKESHORE DR	SAGLE	ID	USA	83860	
PRESIDENT			487 BAY DRIVE	SAGLE	ID	USA	83860	
5. Organized Under the Laws of:		6. Annual Repo	rt must be signed.*					
ID		Signature: Shawna M Parry			Date: 05/24/2010			
C 73285		Name (type or print): Shawna M Parry			Title: Treasurer			
Processed 05/24/2010		* Flectronically r	provided signatures are accepted as original	l signatures				