| No. **C 185920** | **Due no later than Jan 31, 2017** | 2. Registered Agent and Address **(NO PO BOX)** |
|---|---|---|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>**NO FILING FEE IF RECEIVED BY DUE DATE** | **Annual Report Form**<br>**1. Mailing Address: Correct in this box if needed.**<br>APOSTOLIC DOCTRINE MINISTRIES, INC.<br>REV PHILLLIP A KELLEY<br>PO BOX 96<br>KAMIAH ID 83536 | REV PHILLIP A KELLEY<br>1729 KIDDER RIDGE RD<br>KAMIAH ID 83536<br><br>3. New 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 | REV PHILLIP A KELLEY | 1729 KIDDER RIDGE RD PO BOX 96 | KAMIAH | ID | USA | 83536 |
| DIRECTOR | REV STEPHEN M KELLEY | 1721 KIDDER RIDGE RD | KAMIAH | ID | USA | 83536 |
| SECRETARY | REV DONALD MEADE SR | PO BOX 6208 | AKRON | OH | USA | 44312 |

| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | |
|---|---|---|
| **ID**<br>**C 185920** | Signature: Phillip Kelley | Date: 01/28/2017 |
| | Name (type or print): Phillip Kelley | Title: President |

Processed 01/28/2017

* Electronically provided signatures are accepted as original signatures.