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| No. C 198834 | Due no later than Jun 30, 2015 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. CASCADE CHRISTIAN CHURCH CAMP, INC. MARYELLEN THOMAS PO BOX 1092 NAMPA ID 83653 | LARRY CRIST 6463 SUNRISE AVE NAMPA ID 83686 | | | | |
| | | 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 | GREG ANDERSON | 5927 ELKHORN | BOISE | ID | USA | 83709 |
| VICE PRESIDENT | KEN STAMPER | 7047 STRATTON | BOISE | ID | USA | 83704 |
| SECRETARY | MARYELLEN THOMAS | 11854 ARCH ST | BOISE | ID | USA | 83713 |
| 5. Organized Under the Laws of: ID C 198834 | 6. Annual Report must be signed.* Signature: Larry Crist Name (type or print): Larry Crist | | Date: 04/28/2015 Title: Reg. Agent | | | |
| Processed 04/28/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | |