| No. <b>C 28788</b>                                                                                                |                | Due no later than Oct 31, 2013                                                                                                             |                      | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX)                                   |         |             |  |
|-------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------|-------------------------------------------------------------------------------|---------|-------------|--|
| Return to:                                                                                                        |                | Annual Report Form                                                                                                                         |                      |                  | JOSHUA HARDY                                                                  |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080                                  |                | 1. Mailing Address: Correct in this box if needed.  TWIN FALLS CONGREGATION OF JEHOVAH'S WITNESSES, INC. JOSHUA HARDY 668 FIELD STREAM WAY |                      | TWIN FALLS       | 668 FIELD STREAM WAY TWIN FALLS ID 83301  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                                                                          |                | TWIN FALLS ID 83301                                                                                                                        |                      |                  |                                                                               |         |             |  |
| 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                                                                                                          | GEORGE PARKER  |                                                                                                                                            | 1137 VALENCIA        | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| DIRECTOR                                                                                                          | WARREN BECKER  |                                                                                                                                            | 2397 JULIE LANE      | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| DIRECTOR                                                                                                          | STANLEY MAJOR  |                                                                                                                                            | 508 EASTLAND         | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| DIRECTOR                                                                                                          | LYLE AMLIN     |                                                                                                                                            | 176 BRACKEN ST S     | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| DIRECTOR .                                                                                                        | JONATHAN DAVIS |                                                                                                                                            | 1032 COBBLE CREEK    | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| SECRETARY .                                                                                                       | JAMES DUFF     |                                                                                                                                            | 480 ASPENWOOD        | TWIN FALLS       | ID                                                                            | USA     | 83301       |  |
| PRESIDENT JOSHUA HARDY 668 FIELD STREAM WAY TWIN FALLS ID USA 83                                                  |                |                                                                                                                                            |                      |                  |                                                                               | 83301   |             |  |
| 5. Organized Under the Laws of:                                                                                   |                | 6. Annual Repo                                                                                                                             | ort must be signed.* |                  |                                                                               |         |             |  |
| ID<br>C 28788                                                                                                     |                | Signature: Joshua Hardy                                                                                                                    |                      |                  | Date: 10/31/2013                                                              |         |             |  |
|                                                                                                                   |                | Name (type                                                                                                                                 |                      | Title: President |                                                                               |         |             |  |
| Processed 10/31/2013 * Electronically provided signatures are accepted as original signatures.                    |                |                                                                                                                                            |                      |                  |                                                                               |         |             |  |