

No. C 155958		Due no later than Aug 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ST. MARIES EXTENDED HOUSING CORPORATION SANDY KENNELLY CEO C/O VALLEY VISTA CARE 820 ELM ST ST MARIES ID 83861		VALLEY VISTA CARE CORPORATION 820 ELM ST ST MARIES ID 83861		
				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
DIRECTOR	BILL COWIN	1022 PARK DRIVE	ST MARIES	ID	USA	83861
DIRECTOR	WAYNE FOXWORTH	352 AHRS LOOP	ST MARIES	ID	USA	83861
PRESIDENT	TRASK SILVA	PO BOX 336	ST MARIES	ID	USA	83861
DIRECTOR	RICHARD NYQUIST	831 MAIN STREET	ST MARIES	ID	USA	83861
SECRETARY	MICHELE MCDANIEL	PO BOX 606	ST. MARIES	ID	USA	83861
DIRECTOR	JANICE MCCALL	89421 HWY 3 NORTH	ST MARIES	ID	USA	83861
VICE PRESIDENT	CLAUDIA SPOONER	1006 WEST IDAHO	ST MARIES	ID	USA	83861
5. Organized Under the Laws of: ID C 155958		6. Annual Report must be signed.* Signature: Kasey Borgman Name (type or print): Kasey Borgman Date: 08/04/2016 Title: Dir of Corp Compliance				
Processed 08/04/2016		* Electronically provided signatures are accepted as original signatures.				