No. C 188884		Due no later than Oct 31, 2014		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ADDRESS PROPERTY AND ADDRESS OF THE PARTY AND	KATIE CORKERY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. FLOURISH FOUNDATION, INC. KATIE CORKERY 403 2ND AVENUE NORTH HAILEY ID 83333		403 2ND AVENUE NORTH HAILEY ID 83333 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nam	nes and Busin	ess Addresses of I	President, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	ANDREA PIERCEALL		131 N. MAIN STREET, #291	HAILEY	ID	USA	83333	
DIRECTOR	MARK GEORGE		PO BOX 4949	KETCHUM	ID	USA	83340	
PRESIDENT	PATRICIA TO	OBIN	PO BOX 4319	KETCHUM	ID	USA	83340	
PRESIDENT GLEN SHAPI		RO	1420 N. 2ND AVE.	HAILEY	ID	USA	83333	
DIRECTOR	SCOTT MCLEAN		PO BOX 2198	KETCHUM	ID	USA	83340	
DIRECTOR	KATHLEEN MCCABE		PO BOX 4331	KETCHUM	ID	USA	83340	
SECRETARY	LAURIE SAMMIS		105 WILLOW CIRCLE	HAILEY	ID	USA	83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kathleen K. Corkery		Date: 08/18/2014				
C 188884		Name (type or print): Kathleen K. Corkery		Title: Operations Coordinator				
Processed 08/18/2014 * Electronically provided signatures are accepted as original signatures.								