No. C 79506 Return to:		Due no later than Sep 30, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
				10-10-10-10-10-10-10-10-10-10-10-10-10-1	MIKE LOCKNANE		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LIFELINE CRISIS PREGNANCY CENTER, INCORPORATED SECRETARY 1323 12TH AVENUE SOUTH NAMPA ID 83651		1712 9TH STREET S. NAMPA ID 83651 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter N	Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasure	er (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	DAN BUCK		901 MAIN ST	CALDWELL	ID	USA	83605
SECRETARY	Pamela Mil	And the second state of the second	3227 KADEN DRIVE	NAMPA	ID	USA	83686
TREASURER	MICHAEL S	LOCKNANE	1712 9TH ST SO	NAMPA	ID	USA	83651
DIRECTOR	BEVERLY J	VERNER	745 W WILDRYE CT	NAMPA	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report					
ID C 79506		Signature: Micl		Date: 07/13/2010			
		Name (type or		Title: Treasurer			
Processed 07/13/2010		* Electronically pro	ovided signatures are accepted as original si	gnatures.			