No. <b>C 33945</b>		Due no later than Sep 30, 2014	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	BOB NEWCOMB			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CALVARY LUTHERAN CHURCH OF POST FALLS, IDAHO, INC. LINDA FLEMING 1011 N COMPTON ST	1011 N COMPTON ST POST FALLS ID 83854			
NO FILING FEE IF RECEIVED BY DUE DATE		POST FALLS ID 83854 USA	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Nan	nes and Busine	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER SECRETARY	LINDA FLEMI CORY ENGLIS		POST FALLS COEUR D ALENE	ID ID	USA USA	83854 83815
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 33945		Signature: LYLA GROOM CPA Name (type or print): LYLA GROOM CPA	Date: 09/30/2014 Title: ACCOUNTANT			
* Electronically provided signatures are accepted as original signatures.						