

| No. <b>C 24463</b>   |                    | <b>Due no later than Jul 31, 2010</b><br><b>Annual Report Form</b>   |        | 2. Registered Agent and Address ( <b>NO PO BOX</b> )   |         |  |  |
|--|--------------------|--|--------|--|---------|--|--|
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>SALMON METHODIST CHURCH, INC.<br>MILTON A SLAVIN<br>116 N CENTER ST<br>SALMON ID 83467<br>USA |        | MILTON A. SLAVIN<br>116 N CENTER ST<br>SALMON ID 83467 |         |  |  |
|  |                    |  |        |  |         | 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   | REV. STILLMAN BOND | 201 LOMBARD STREET   | SALMON | ID   | USA     | 83467                                      |  |
| DIRECTOR   | FAUNTELLA MILLER   | 405 COURTHOUSE DRIVE   | SALMON | ID   | USA     | 83467                                      |  |
| DIRECTOR   | LARRY TAYLOR       | 511 AVENUE B   | SALMON | ID   | USA     | 83467                                      |  |
| TREASURER  | NORMA F KOSSLER    | 8 KOSSLER LANE   | SALMON | ID   | USA     | 83467                                      |  |
| SECRETARY  | ROBERTA A SLAVIN   | 116 N CENTER STREET  | SALMON | ID   | USA     | 83467                                      |  |
| PRESIDENT  | MILTON A SLAVIN    | 116 N CENTER ST  | SALMON | ID   | USA     | 83467                                      |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 24463</b>   |                    | <b>6. Annual Report must be signed.*</b><br><br>Signature: Roberta A. Slavin<br>Name (type or print): Roberta A. Slavin  |        |  |         |  |  |
|  |                    | Date: 06/14/2010<br>Title: Secretary   |        |  |         |  |  |
| Processed 06/14/2010   |                    | * Electronically provided signatures are accepted as original signatures.  |        |  |         |  |  |