No. C 84240		Due no later than Jun 30, 2018 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:				JIM HIGGINS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PREGNANCY CARE CENTER, INC. (THE) CHRISTINE T KING 2020 12TH AVE LEWISTON ID 83501		LEWISTON II	2020 12TH AVE LEWISTON ID 83501 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR PRESIDENT SECRETARY TREASURER VICE PRESIDENT	CHRISTINE JIM HIGGINS CRAIG EMER CAROLINE H JIM BROEMN	RSON ATFIELD	721A LINDEN AVE 1744 VALLEY VIEW DR 222 N. PROSPECT BLVD 346 W. RESERVOIR DR 2485 17TH ST	LEWISTON CLARKSTON LEWISTON LEWISTON CLARKSTON	ID WA ID ID WA	USA USA USA USA USA	83501 99403 83501 83501 99403	
5. Organized Under the Laws of:		6. Annual Report must be signed.*			Data	25/10/2010		
ID C 84240		Signature: LauraP@lcpartners.org Name (type or print): LauraP@lcpartners.org			Date: 05/10/2018 Title: BOOKKEEPER			
Processed 05/10/2018		* Electronically provided signatures are accepted as original signatures.						