

No. C 159228		Due no later than Mar 31, 2007		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. COMPASSION & CHOICES, IDAHO CHAPTER, INC. BOB M BROWN 3692 N STEVEN PL COEUR D ALENE ID 83815		BOB M BROWN 3692 N STEVEN PL COEUR D ALENE ID 83815		
				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
PRESIDENT	BOB M. BROWN	3692 N. STEVEN PL	COEUR D'ALENE	ID	USA	83815
SECRETARY	JOANN NELSON	E 2140 CRESTLINE DR	COEUR D'ALENE	ID	USA	83814
DIRECTOR	THERESA POTTS	4103 ARROWHEAD RD	COEUR D'ALENE,	ID	USA	83815
DIRECTOR	NANCY FLAGAN	3250 ARMSTRONG CT	COEUR D'ALENE	ID	USA	83814
DIRECTOR	FLORINE DOOLEY	1039 N. 15TH ST.	COEUR D'ALENE,	ID	USA	83814
DIRECTOR	KAY HAYES	388 E. KNOTTY PINE LN.	COEUR D'ALENE	ID	USA	83815
5. Organized Under the Laws of: IDAHO C 159228		6. Annual Report must be signed.* Signature: Bob M. Brown Name (type or print): Bob M. Brown Date: 03/07/2007 Title: President				
Processed 03/07/2007		* Electronically provided signatures are accepted as original signatures.				