

No. C 153105		Due no later than Feb 28, 2011		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. PRAYER CONNECTION HEALING ROOMS, INC. DAVID P FUCHS P O BOX 499 LEWISTON ID 83501 USA		DAVID P FUCHS 601 25TH AVE LEWISTON ID 83501		
				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	KATHY S SCHMIDT	2428 SUNSETVIEW CT	CLARKSTON	WA	USA	99403
DIRECTOR	KATHY S SCHMIDT	2428 SUNSETVIEW CT	CLARKSTON	WA	USA	99403
SECRETARY	DONALD J SCHMIDT	2428 SUNSETVIEW CT	CLARKSTON	WA	USA	99403
DIRECTOR	DONALD J SCHMIDT	2428 SUNSETVIEW CT	CLARKSTON	WA	USA	99403
TREASURER	DAVID P FUCHS	601 25TH AVE	LEWISTON	ID	USA	83501
DIRECTOR	MARILYN RIGGLE	629 RIVERSIDE BLVD	CLARKSTON	WA	USA	99403
DIRECTOR	ELDON L RIGGLE	629 RIVERSIDE BLVD	CLARKSTON	WA	USA	99403
DIRECTOR	DAVID P FUCHS	601 25TH AVE	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID C 153105		6. Annual Report must be signed.* Signature: David P Fuchs Name (type or print): David P Fuchs Date: 02/22/2011 Title: Treasurer				
Processed 02/22/2011		* Electronically provided signatures are accepted as original signatures.				