No. C 65522	Due no later than Dec 31, 2016		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		POLLY S H	POLLY S HENDERSON 9379 CAVENDISH HWY LENORE ID 83541 3. New Registered Agent Signature:*			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CAVENDISH UNITED METHODIST CHURCH, INCORPORATED POLLY S HENDERSON 9379 CAVENDISH HWY LENORE ID 83541		ED				
NO FILING FEE IF			3. <u>New</u> Registe				
RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Busir	ness Addresses of P	resident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY AUDRA S COCHRAN		9379 CAVENDISH HWY	LENORE	ID	USA	83541	
	HENDERSON	7391 CAVENDISH HWY	LENORE	ID	USA	83541	
TREASURER POLLY S H	EASURER POLLY S HENDERSON		LENORE	ID	USA	83541	
5. Organized Under the Laws of: 6. Annual Report		must be signed.*					
ID Signature: Poll		/ Henderson	Date: 10/26/2016				
C 65522 Name (type or		print): Polly Henderson	Title	Title: Admin. Chairman			
Processed 10/26/2016	* Electronically provided signatures are accepted as original signatures.						