

No. C 193950		Due no later than Mar 31, 2014 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. TRINITY ASSISTED LIVING OF IDAHO, INC. ELISHIA M RICKY SMITH 3355 N FIVE MILE RD #236 BOISE ID 83713		ASSURED TAX & BOOKKEEPING INC 2763 E SANTO STEFANO DR. MERIDIAN ID 83642			
						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	
VICE PRESIDENT	MIKE SMITH	5390 S FIVE MILE RD.	BOISE	ID	USA	83709	
PRESIDENT	ELISHIA SMITH	5390 S FIVE MILE RD.	BOISE	ID	USA	83709	
5. Organized Under the Laws of: ID C 193950		6. Annual Report must be signed.* Signature: Elishia Smith Name (type or print): Elishia Smith					
Processed 02/25/2014		Date: 02/25/2014 Title: President * Electronically provided signatures are accepted as original signatures.					