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| No. C 203408 | | Due no later than Sep 30, 2015 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. APOSTOLIC FAITH TABERNACLE 17 DONS WAY BLACKFOOT ID 83221 | | JOSEPH KITCHENS 27 SOUTH 250 EAST BLACKFOOT ID 83221 | | | |
| | | | | | | 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 | |
| SECRETARY | MICHELLE KITCHENS | 27 SOUTH 250 EAST | BLACKFOOT | ID | 83221 | | |
| 5. Organized Under the Laws of: WY C 203408 | | 6. Annual Report must be signed.* Signature: michelle kitchens Name (type or print): michelle kitchens Date: 07/21/2015 Title: secretary | | | | | |
| Processed 07/21/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |