

No. C 84240

Due no later than June 30, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

KRISTA ELLIS
6554 COUGAR RIDGE DR
LEWISTON, ID 83501

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

PREGNANCY CARE CENTER, INC. (THE)
2020 12TH AVE
LEWISTON, ID 83501NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
Chair	Krista Ellis	2020 12th Ave	Lewiston	ID	83501
Co-chair	Betty Weeks	2020 12th Ave	Lewiston	ID	83501
Sec/treasurer	Polly Black-Rippe	2020 12th Ave	Lewiston	ID	83501
Director	Virginia Lusby	2020 12th Ave	Lewiston	ID	83501
Director	Ann Shupe	2020 12th Ave	Lewiston	ID	83501

5. Organized Under the Laws of:
IDAHO
C 84240

6.

Signature

Ann Shupe

Date

4/15/08

Name

(Typed or
Printed)

ANN SHUPE

Title

CEO

Issued 04/01/2008

Do Not Tape or Staple

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