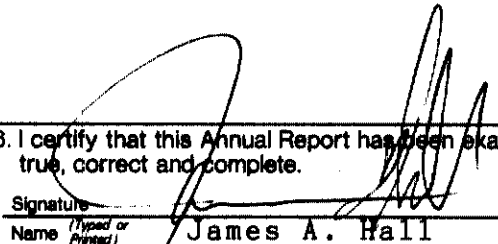


No. 9255	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																																			
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Due No Later Than November 1, 1991		James A. Hall XXXXXXXXXXXX																																			
	1. Mailing Address: <i>Please Correct If Not Correct</i>		461 FILER AVENUE WEST																																			
	CHURCH OF THE BRETHREN OF ERVIN L. HUSTON 461 FILER AVE. W. TWIN FALLS ID 83301		TWIN FALLS ID 83301																																			
3. Incorporated Under The Laws of ID																																						
NO: 009255																																						
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Jane Merrill</td> <td>Rt. 1 4347 N 3200 E</td> <td>Filer</td> <td>ID</td> <td>83328</td> </tr> <tr> <td>Secretary:</td> <td>NaJean Dutry</td> <td>1547 Elizabeth Ave.</td> <td>Twin Falls</td> <td>Id.</td> <td>83301</td> </tr> <tr> <td rowspan="3">Directors:</td> <td>Loren Holloway</td> <td>Rt 1 4333 N 2100 E</td> <td>Filer</td> <td>ID</td> <td>83328</td> </tr> <tr> <td>Joan Huston</td> <td>252 Filer Ave. W.</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Bill Benkula</td> <td>1221 9th Ave E.</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Jane Merrill	Rt. 1 4347 N 3200 E	Filer	ID	83328	Secretary:	NaJean Dutry	1547 Elizabeth Ave.	Twin Falls	Id.	83301	Directors:	Loren Holloway	Rt 1 4333 N 2100 E	Filer	ID	83328	Joan Huston	252 Filer Ave. W.	Twin Falls	ID	83301	Bill Benkula	1221 9th Ave E.	Twin Falls,	ID	83301
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5. Nature of Business church	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Signature _____ Name (Typed or Printed) James A. Hall Date 7/8/91 Title pastor																																					