No. C 164366 Return to:		Due no later than Jan 31, 2015 Annual Report Form		2. Registered Age	Registered Agent and Address (NO PO BOX) CINDY WOOD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. FAMILY PROMISE OF NORTH IDAHO, INC. CINDY Z WOOD PO BOX 3682		COEUR D'ALENE	COEUR D'ALENE 83814			
		COEUR D'ALENE ID 83816		3. <u>New</u> Registered	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter	Names and Busin	ess Addresses of F	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ANDREA STORJOHANN		16458 N. SITKA RD	RATHDRUM	ID	USA	83858	
TREASURER	TIM FRAHM		3516 W. PINERIDGE DR	COEUR D'ALENE	ID	USA	83815	
DIRECTOR	THERESA GI	IBBENS	8130 CHATEAUX	HAYDEN	ID	USA	83835	
VICE PRESIDENT	MIKE IRWIN		205 E. 7TH	POST FALLS	ID	USA	83854	
DIRECTOR	MARY ROBINETTE		PO BOX 878	HAYDEN	ID	USA	83835	
DIRECTOR	RANDALL HENRY		807 N. C STREET	COEUR D ALENE	ID	USA	83814	
DIRECTOR	SUE BOCKELMAN		2399 N. HOWELL RD	COEUR D ALENE	ID	USA	83854	
PRESIDENT	TERI BURCH	I	5508 N PARKWOOD	COEUR D ALENE	ID	USA	83815	
5. Organized Under the Laws of:		6. Annual Report						
ID		Signature: Cindy Wood		Date: 11/2	Date: 11/25/2014			
C 164366		Name (type or	print): Cindy Wood	Title: Exe	Title: Executive Director			
Processed 11/25/2014		* Electronically pr	ovided signatures are accepted as origina	l signatures.				