

| | | | | | | | |
|--|--------------------|---|---------|--|---------|--|--|
| No. C 125428 | | Due no later than Aug 31, 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. ROSE OF SHARON TABERNACLE, INC. BEN BARKER PO BOX 3529 OLDTOWN ID 83822 | | BEN BARKER 36319 HWY 41 OLDTOWN ID 83822 | | | |
| | | | | | | 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 | DEBORAH L. BARKER | 36319 HWY 41 P.O. BOX 3529 | OLDTOWN | ID | USA | 83822 | |
| PRESIDENT | BEN BARKER | 36319 HWY 41 P.O. BOX 3529 | OLDTOWN | ID | USA | 83822 | |
| DIRECTOR | STANLEY T. SUMMERS | 393 S. PAHA LN | BISHOP | CA | USA | 93514 | |
| 5. Organized Under the Laws of: ID C 125428 | | 6. Annual Report must be signed.* Signature: Deborah L. Barker Name (type or print): Deborah L. Barker | | | | | |
| | | Date: 08/05/2015 Title: Secretary | | | | | |
| Processed 08/05/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |