No. C 106583		Due no later than Jun 30, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SHARON BRESHEARS 1962 S 2100 E GOODING ID 83330			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. VALLEY HOUSING COALITION, INC. SHARON BRESHEARS 507 ADDISON AVE W TWIN FALLS ID 83301					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SHARON E						
	TWIN FALL			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and	Business Addresses	of President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT JOE M		507 ADDISON AVE W	TWIN FALLS	ID	USA	83301	
	EVERTON	507 ADDISON AVE W	TWIN FALLS	ID	USA	83301	
TREASURER KAYLA	ZALDIVAR	507 ADDISON AVE W	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: 6. Annual R		port must be signed.*					
ID Signatur		Nancy Koonce Date: 05/10/2018					
C 106583	Name (typ	Name (type or print): Nancy Koonce		Title: CPA			
Processed 05/10/2018	* Electronically provided signatures are accepted as original signatures.						