

No. <b>W 153196</b>		<b>Due no later than Jun 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		TERRI SCHMIDT 711 S JEFFERSON ST MOSCOW ID 83843	
		<b>1. Mailing Address: Correct in this box if needed.</b> LIFE COMPASS INSTITUTE, LLC SCOTT S CAMPBELL PO BOX 533 PULLMAN WA 99163		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	SCOTT S CAMPBELL	PO BOX 533	PULLMAN	WA	USA 99163-0533
5. Organized Under the Laws of:  <b>W 153196</b>		6. Annual Report must be signed.* Signature: Scott S Campbell Name (type or print): Scott S Campbell Date: 07/01/2016 Title: Manager			
Processed 07/01/2016		* Electronically provided signatures are accepted as original signatures.			