No. C 94688		Due no later than Mar 31, 2013		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			MELODY A BURNS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. FAMILY ASSISTANCE IN TRANSITIONAL HOUSING (FAITH), INC. SUZANNE E HERSH PO BOX 2553		737 CLEVELAND ST. #1 IDAHO FALLS ID 83401 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS ID 83403 USA		3. INCOME REGISTER 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	
PRESIDENT	AMANDA ELY		1810 W. BROADWAY	IDAHO FALLS	ID	USA	83402	
SECRETARY	TROY DEAN	E	3550 BRIAR CREEK LANE	AMMON	ID	USA	83406	
DIRECTOR			1795 W BROADWAY	IDAHO FALLS	ID	USA	83402	
DIRECTOR	MICHAEL E	GLASER	793 CLEVELAND	IDAHO FALLS	ID	USA	83401	
DIRECTOR			3955 BOMBARDIER AVENUE	IDAHO FALLS	ID	USA	83402	
DIRECTOR	LYNN SEYMOUR 2500 ROSS AVENUE IDAHO FALLS ID USA 8340						83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Suzanne E. Hersh		Date: 01/18/2013				
C 94688		Name (type or print): Suzanne E. Hersh		Title: Executive Director				
Processed 01/18/2013		* Electronically pro	ctronically provided signatures are accepted as original signatures.					