No. <b>C 22599</b>		Due no later than Jul 31, 2011 Annual Report Form  1. Mailing Address: Correct in this box if needed.  ST. MICHAEL'S PARISH, INC. RICHARD DEMAREST 518 N 8TH BOISE ID 83702		2. Registered	2. Registered Agent and Address (NO PO BOX)  RICHARD DEMAREST  518 N 8TH ST  BOISE ID 83702  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE				F10 N OTH				
				BOISE ID				
4. Corporations: Enter N	ames and Busin	ess Addresses o	f President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY SHARON MA		ANNING	518 N. 8TH ST.	BOISE	ID	USA	83702	
TREASURER	JRER GLEN WALKI		518 N. 8TH ST.	BOISE	ID	USA	83702	
DIRECTOR	WILL REILLY	′	518 N. 8TH ST.	BOISE	ID	USA	83702	
DIRECTOR	RECTOR MICHELLE HICK		518 N. 8TH ST.	BOISE	ID	USA	83702	
PRESIDENT	RICHARD DEMAREST		518 N. 8TH ST.	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Repo	rt must be signed.*					
ID C 22599		Signature: R	ichard Demarest		Date: 08/02/2011			
		Name (type	or print): Richard Demarest		Title: Dean			
Processed 08/02/2011 * Electronically provided signatures are accepted as original signatures.								