No. C 204964		Due no later than Feb 29, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. BONNERS FERRY WOMEN'S CANCER EDUCATION AND SUPPORT GROUP INC. NONA KAYE CLARK 6595 MONROE ST BONNERS FERRY ID 83805		2. Registered Age	2. Registered Agent and Address (NO PO BOX) NONA KAY CLARK 7402 CARIBOU ST BONNERS FERRY ID 83805 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				No. 12 September 1997				
				3. <u>New</u> Registered				
4. Corporations: Enter	Names and Busin	ess Addresses of P	resident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARGARET	HUNRICHS	PO BOX 1073	BONNERS FERRY	ID		83805	
DIRECTOR LOUISE CAR		TER	6482 WELLS ST	BONNERS FERRY	ID		83805	
DIRECTOR VIRGINIA SAN		NDBORN	6605 FRY ST	BONNERS FERRY	ID		83805	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 204964		Signature: Non		Date: 01/25/2016				
		Name (type or print): Nona Kaye Clark			Title: Secretary			
Processed 01/25/2016	5	* Electronically pro	ovided signatures are accepted as origina	l signatures.				