

|  |                    |  |               |  |         |             |
|--|--------------------|--|---------------|--|---------|-------------|
| No. <b>C 85454</b>   |                    | <b>Due no later than Dec 31, 2013</b>  |               | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>FAMILIES TOGETHER OF THE PALOUSE<br>RUTH A GARFIELD<br>P.O. BOX 9323<br>MOSCOW ID 83843<br>USA |               | CHRIS CURRY<br>621 BRITTON LANE<br>MOSCOW ID 83843 |         |             |
|  |                    |  |               | 3. <u>New</u> Registered 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 |
| SECRETARY  | JEANNETTE SOLIMINE | 212 S. CROMWELL STREET   | COLFAX        | WA   | USA     | 99111       |
| DIRECTOR   | CAROLE BROWN       | 4222 18TH ST. NW   | WASHINGTON    | DC   | USA     | 20017       |
| DIRECTOR   | BRUCE HALEY        | 4052 OAKESDALE RD  | OAKESDALE     | WA   | USA     | 99158       |
| DIRECTOR   | KIM HOLAPA         | 350 NE TERRE VIEW DR.  | PULLMAN       | WA   | USA     | 99164       |
| DIRECTOR   | SHERI MINARD       | 216 SUNRISE DR   | MOSCOW        | ID   | USA     | 83843       |
| PRESIDENT  | DOUGLASS PIERCE    | 1626 LINCOLN WAY   | COEUR D'ALENE | ID   | USA     | 83814       |
| TREASURER  | DEBORAH HANDY      | 519 JOHNSON HALL   | PULLMAN       | WA   | USA     | 99164       |
| 5. Organized Under the Laws of:<br><br><b>WA<br/>C 85454</b>   |                    | 6. Annual Report must be signed.*<br>Signature: Ruth Garfield<br>Name (type or print): Ruth Garfield   |               |  |         |             |
|  |                    | Date: 11/21/2013<br>Title: Executive Director  |               |  |         |             |
| Processed 11/21/2013   |                    | * Electronically provided signatures are accepted as original signatures.  |               |  |         |             |