

No. C 189064		Due no later than Nov 30, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ROCK CREEK FOOD PANTRY, INC. TERI K LEE P.O. BOX 853 KIMBERLY ID 83341		ROBYN MOSS 318 W CENTER KIMBERLY ID 83341			
						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	
DIRECTOR	KATHLEEN NOH	141 CENTER ST	KIMBERLY	ID	USA	83341	
TREASURER	TERI K LEE	802 ARROW WOOD CT.	TWIN FALLS	ID	USA	83301	
SECRETARY	BONNIE PETER	476 FALLS AVE. W	TWIN FALLS	ID	USA	83301	
PRESIDENT	ROBYN MOSS	318 CENTER ST. W	KIMBERLY	ID	USA	83341	
DIRECTOR	SHIRLEY DAVIS	4053 NORTH 3500EAST	KIMBERLY	ID	USA	83341	
DIRECTOR	DALE HAMMOND	200 BANNING DR.	KIMBERLY	ID	USA	83341	
DIRECTOR	DEBORAH JERKE	409 DIAMOND DR.	KIMBERLY	ID	USA	83341	
DIRECTOR	SUE MILLER	507 CENTER STREET EAST	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of: ID C 189064		6. Annual Report must be signed.* Signature: Teri K. Lee Name (type or print): Teri K. Lee					
		Date: 10/30/2015 Title: Treasurer					
Processed 10/30/2015 * Electronically provided signatures are accepted as original signatures.							