

No. <b>C 103351</b>		<b>Due no later than Sep 30, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> MOUNTAIN HOME/ELMORE COUNTY MINISTERIAL ASSOCIATION, INC. TRUMAN PARKER PO BOX 659 MOUNTAIN HOME ID 83647		TRUMAN PARKER 515 E 15TH N MOUNTAIN HOME ID 83647		
				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
PRESIDENT	TAMMY HEIMGARTNER	2422 AMERICAN LEGION BLVD	MOUNTAIN HOME	ID	USA	83647
DIRECTOR	GARY ALLEN	265 N 4TH EAST	MOUNTAIN HOME	ID	USA	83647
SECRETARY	TRUMAN PARKER	515 E 15TH N	MOUNTAIN HOME	ID	USA	83647
TREASURER	LYNN LARSEN	835 S 13TH EAST	MOUNTAIN HOME	ID	USA	83647
DIRECTOR	TAMMY HEIMGARTNER	2422 AMERICAN LEGION BLVD	MOUNTAIN HOME	ID	USA	83647
DIRECTOR	TRUMAN PARKER	515 E 15TH N	MOUNTAIN HOME	ID	USA	83647
DIRECTOR	GARY ALLEN	265 N 4TH E	MOUNTAIN HOME	ID	USA	83647
5. Organized Under the Laws of:  <b>ID C 103351</b>		6. Annual Report must be signed.* Signature: LYNN LARSEN Name (type or print): LYNN LARSEN Date: 09/28/2015 Title: TREASURER				
Processed 09/28/2015		* Electronically provided signatures are accepted as original signatures.				