No. C 4887			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	KATHY ABEND 544 CEDAR DR BURLEY ID 83318 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. UNITED METHODIST CHURCH OF BURLEY, INC. GINA WARD PO BOX 447 BURLEY ID 83318				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Na	ames and Busine	ess Addresses of President, Secretary, and Directors. Treasurer (c	optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER TOMMIE L DE		DEAN PO BOX 447	BURLEY	ID	USA	83318
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: D. Scott llen	Date: 05/20/2015			
C 4887		Name (type or print): D. Scott llen	Title: Pastor			
Processed 05/20/2015 * Electronically provided signatures are accepted as original signatures.						