

No. C 87064		Due no later than Jul 31, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. EAST END PROVIDERS, INC. CECILLE GRIFFITH BOX 4 KIMBERLY ID 83341-0004 USA		HEATHER HOPKINS 3140 N 3524 E 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	CECILLE GRIFFITH	215 MAIN NORTH	KIMBERLY	ID	USA	83341
TREASURER	JOY BARINAGA	3467 N 3500 E	KIMBERLY	ID	USA	83341
SECRETARY	ANN ANDERSON	423 WASHINGTON	KIMBERLY	ID	USA	83341
PRESIDENT	HEATHER HOPKINS	3140 N 3524 E	KIMBERLY	ID	USA	83341
5. Organized Under the Laws of: ID C 87064		6. Annual Report must be signed.* Signature: Joy L. Barinaga Name (type or print): Joy L. Barinaga Date: 05/23/2014 Title: Treasurer				
Processed 05/23/2014		* Electronically provided signatures are accepted as original signatures.				