No. <b>C 44743</b>		Due no later than Dec 31, 2013		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		GREG J FULLER 508 E FLORIDA NAMPA ID 83686  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.  PORT OF HOPE CENTERS, INC.  JAKE DANIBLE  508 E FLORIDA  NAMPA ID 83686						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busine	ess Addresses of President, Secretary, and Directors.	Treasurer (	(optional).				
Office Held Na	ame	Street or PO Address		City	State	Country	Postal Code	
PRESIDENT BE	ERRY H MY	ÆRS 508 E FLORIDA		NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 44743		Signature: Jake Danible	Date: 11/05/2013					
		Name (type or print): Jake Danible	Title: Controller					
Processed 11/05/2013	* Electronically provided signatures are accepted as original signatures.							