| No. C 154117 | Due no later than Apr 30, 2007 | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|---|---|-------|---------|-------------|
| Return to: | Annual Report Form | G ERBES | | | |
| SECRETARY OF STATE | 1. Mailing Address: Correct in this box if needed. | 220 E 5TH #8661 MOSCOW ID 83843 | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | HWS MINISTRIES, LTD. DR. G. JEROME PO BOX 8661 | | | | |
| | MOSCOW ID 83843 | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | |
| 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 DR. G. JERC | PO BOX 8661 | MOSCOW | ID | USA | 83843 |
| 5. Organized Under the Laws of: | 6. Annual Report must be signed.* | | | | |
| IDAHO | Signature: G. JEROME Date: 02/27/2007 | | | | |
| C 154117 | Name (type or print): G. JEROME | Title: SECRETARY | | | |
| Processed 02/27/2007 | * Electronically provided signatures are accepted as original signatures. | | | | |