

No. C 189218	Due no later than Nov 30, 2012 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. IDAHO COUNCIL FOR HEALTHY HOMES, INC. JOHN PRICE 5464 S CAPER PL BOISE ID 83716 USA		JOHN PRICE 5464 S CAPER PL BOISE ID 83716			
			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	GARY HANES	992 E RIVERPARK LN	BOISE	ID	USA	83706
DIRECTOR	SARAH WEPPNER	1115 N 6TH	BOISE	ID	USA	83702
DIRECTOR	DALLAS MILLINGTON	107 E 40TH	BOISE	ID	USA	83714
5. Organized Under the Laws of: ID C 189218	6. Annual Report must be signed.* Signature: John Price Name (type or print): John Price		Date: 09/19/2012 Title: Executive Director			
Processed 09/19/2012		* Electronically provided signatures are accepted as original signatures.				