No. <b>C 182178</b>		Due no later than Mar 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BARBARA BROWN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Addre CARING PEOPLE FO KAREN GLAZIER 6410 MAIN ST BONNERS FERRY II	,	6410 MAIN BONNERS FERRY ID 83805  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 B	BARBARA J	BROWN	PO BOX 825	BONNERS FERRY	ID	USA	83805
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Barbara	Date: 01/21/2017				
C 182178		Name (type or prin	Title: President				
Processed 01/21/2017	rocessed 01/21/2017 * Electronically provided signatures are accepted as original signatures.						