

No. C 49370		Due no later than Apr 30, 2018		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		BARBARA KOVACS 6635 LINCOLN BONNERS FERRY ID 83805-1639			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SENIORS HOSPITALITY CENTER, INC. ATTN BARBARA KOVACS PO BOX 1639 6635 LINCOLN ST BONNERS FERRY ID 83805-1639 USA					
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	
SECRETARY	LILA NAVARRO	6848 EISENHOWER STREET	BONNERS FERRY	ID	USA	83805	
DIRECTOR	PATRICIA OLSON	523 BLUE SKY ROAD	BONNERS FERRY	ID	USA	83805	
PRESIDENT	ROBERT SABOE	6723 BUCHANAN STREET	BONNERS FERRY	ID	USA	83805	
VICE PRESIDENT	ROBERT SPALDING	6968 BUFFALO STREET	BONNERS FERRY	ID	USA	83805	
TREASURER	LARRY HIGGINS	5903 MAIN STREET	BONNERS FERRY	ID	USA	83805	
DIRECTOR	TOM ALLINGER	6870 CODY ST APT A	BONNERS FERRY	ID	USA	83805	
DIRECTOR	GRACE LEIDT	85 GRUMPY LANE	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of: ID C 49370		6. Annual Report must be signed.* Signature: BARBARA KOVACS Name (type or print): BARBARA KOVACS					
				Date: 02/27/2018		Title: ADMINISTRATOR	
Processed 02/27/2018		* Electronically provided signatures are accepted as original signatures.					