| No. C 185052 | | Due no later than Nov 30, 2014 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|---|--|--|------------------------|---|------------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTHWEST INTEGRITY HOUSING CO. 413 W IDAHO ST STE 200 BOISE ID 83702 | | 413 W IDAI BOISE ID | THOMAS C MANNSCHRECK 413 W IDAHO ST STE 200 BOISE ID 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE RECEIVED BY DUE | DATE | ass Addrassas of Pra | sident, Secretary, and Directors. Treası | urer (ontional) | | | | |
| Office Held | Name | C33 / (ddi C33C3 Oi 11C) | Street or PO Address | City | State | Country | Postal Code | |
| DIRECTOR DIRECTOR | BARBARA E MANNSCHRECK CLAIRE M CASAZZA | | 413 W IDAHO ST STE 200 2606 N 26TH ST | BOISE BOISE | ID ID | USA USA | 83702 83702 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Claire Casazza | | Date: 09/22/ | Date: 09/22/2014 | | | |
| C 185052 | | Name (type or print): Claire Casazza | | Title: Autho | Title: Authorized Representative | | | |
| Processed 09/22/2014 | | * Electronically provi | ded signatures are accepted as original | signatures. | | | | |