



No. C 31371	Due no later than Dec 31, 2011 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BRIAN SHERRETS 831 S 7TH AVE CHALLIS ID 83226	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CHALLIS MISSION CHURCH, INC. PAUL STROUD BRIAN D. SHERRETS PO BOX 204 CHALLIS ID 83226 USA		3. New Registered Agent Signature: 	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
<i>box</i> TRUSTEE	Joshua DO	P.O. BOX 204	CHALLIS	ID U.S. 83226
Trustee	Cecile Fisher	P.O. BOX 204	CHALLIS	ID U.S. 83226
Trustee	BRIAN D. SHERRETS	P.O. BOX 204	CHALLIS	ID U.S. 83226
Treasurer	KORETTA SHERRETS	P.O. BOX 204	CHALLIS	ID U.S. 83226
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO C 31371 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature:  <hr/> Name (type or print): BRIAN D. SHERRETS </div> <div> Date: 2/27/12 <hr/> Title: TRUSTEE </div> </div>		
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.