No. C 164682		Due no later than Jan 31, 2017		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JANA PEER	1003 RICHARDSON AVE LEWISTON ID 83501-8350			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. FAMILY PROMISE OF LEWIS CLARK VALLEY, INC. JANA PEER 720 16TH AVE #41		LEWISTON II				
		LEWISTON ID 83501		3. <u>New</u> Registere	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter	Names and Busin	ess Addresses of Presi	dent, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	TONI KRAUT	-	3418 12TH STREET C	LEWISTON	ID	USA	83501	
DIRECTOR	LIZ CHAVEZ		1521 15TH AVE	LEWISTON	ID	USA	83501	
DIRECTOR	ECTOR HEATHER OHRTMAN-ROGERS		PO BOX 867	ASOTIN	WA	USA	99402	
VICE PRESIDENT SUSAN BUTTS		1136 9TH STREET	CLARKSTON	WA	USA	99403		
DIRECTOR	IRECTOR PAUL ROWE		1102 8TH AVENUE	LEWISTON	ID	USA	83501	
SECRETARY	ETARY JANA PEER		1003 RICHARDSON AVE	LEWISTON	ID	USA	83501	
DIRECTOR	SHERI ALLEN		566 CRESTLINE CIRCLE DRIVE	LEWISTON	ID	USA	83501	
DIRECTOR	ECTOR KATHY CLOUSER		909 CYPRESS ST.	LEWISTON	ID	USA	83501	
DIRECTOR	CHRIS DAVIES		3101 4TH STREET	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
ID		Signature: Jana L Peer			Date: 01/10/2017			
C 164682		Name (type or prir	2	Title: Secretary				
Processed 01/10/2017		* Electronically provid	ed signatures are accepted as original s	signatures.				