

|                                                                                                                                                        |                  |                                                                                                                                                                                                       |            |                                                                   |         |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------------|---------|-------------|
| No. <b>C 53592</b>                                                                                                                                     |                  | Due no later than Jun 30, 2014                                                                                                                                                                        |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>                |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><b>1. Mailing Address: Correct in this box if needed.</b><br>GOOD SHEPHERD CHRIST THE KING, INC. (THE)<br>MARY A TEMPLIN<br>414 EAST FIRST AVENUE<br>POST FALLS ID 83854 |            | ROBERT G. TEMPLIN<br>414 EAST FIRST AVENUE<br>POST FALLS ID 83854 |         |             |
|                                                                                                                                                        |                  |                                                                                                                                                                                                       |            | 3. <u>New</u> Registered Agent Signature:*                        |         |             |
| 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                                                                                                                                               | BARBARA KLAVANO  | 414 E 1ST AVE                                                                                                                                                                                         | POST FALLS | ID                                                                | USA     | 83854       |
| DIRECTOR                                                                                                                                               | BLYTHE M MOSHER  | 414 E 1ST AVE                                                                                                                                                                                         | POST FALLS | ID                                                                | USA     | 83854       |
| SECRETARY                                                                                                                                              | ROBERT G TEMPLIN | 414 E 1ST AVE                                                                                                                                                                                         | POST FALLS | ID                                                                | USA     | 83854       |
| PRESIDENT                                                                                                                                              | MARY A TEMPLIN   | 414 E 1ST AVE                                                                                                                                                                                         | POST FALLS | ID                                                                | USA     | 83854       |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 53592</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: Mary A. Templin<br>Name (type or print): Mary A. Templin                                                                                              |            |                                                                   |         |             |
|                                                                                                                                                        |                  | Date: 04/17/2014<br>Title: President                                                                                                                                                                  |            |                                                                   |         |             |
| Processed 04/17/2014                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                                             |            |                                                                   |         |             |