

No. C 75939		Due no later than May 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) CHARLENE HUMPHREYS 490 EAST 2ND NORTH MOUNTAIN HOME ID 83647																						
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. CEDAR CREST RETIREMENT CENTER, INC. CHARLENE HUMPHREYS 1200 E 6TH S MOUNTAIN HOME ID 83647		3. New Registered Agent Signature.																						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Charlene Humphreys</td> <td>480 E 2nd North</td> <td>Mountain Home</td> <td>Ida</td> <td>Elmore</td> <td>83647</td> </tr> <tr> <td>Vice President</td> <td>Greg Humphreys</td> <td></td> <td>Middleton</td> <td>Ida</td> <td>Can</td> <td>83647</td> </tr> </tbody> </table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Charlene Humphreys	480 E 2nd North	Mountain Home	Ida	Elmore	83647	Vice President	Greg Humphreys		Middleton	Ida	Can	83647
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Vice President	Greg Humphreys		Middleton	Ida	Can	83647																				
5. Organized Under the Laws of: IDAHO C 75939		6. Signature: <u>Charlene Humphreys</u> Date: <u>5-20-2013</u> Name (type or print): <u>Charlene Humphreys</u> Title: <u>Owner</u>																								
Issued 05/28/2013 by KAH																										

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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