No. C 137915		Due no later than Mar 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		EDWARD O LOGGINS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. NHS LENDING, INC. RITA J BEEDLE PO BOX 8223		3380 W AMERICANA TERRACE SUITE 120 BOISE ID 83706-8364			
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83707-2223		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	CHRIS STROH		2601 RIDGECREST DRIVE	BOISE	ID	USA	83712
DIRECTOR	JANET MOLLERUP		5459 EAST BRANCH COURT	BOISE	ID	USA	83716
SECRETARY	DAWN DAVIS		3385 N MAPLESTONE AVE	MERIDIAN	ID	USA	83646
DIRECTOR	BRAD LISH		3845 W. STATE STREET	BOISE	ID	USA	83703
DIRECTOR	ERIN SORENSEN		912 N. 28TH STREET	BOISE	ID	USA	83702
VICE PRESIDENT	RACHEL ANDERSON		9896 W. CAROLINA DRIVE	BOISE	ID	USA	83709
DIRECTOR	GENIE SUE WEPPNER		2800 LANCASTER DRIVE	BOISE	ID	USA	83702
DIRECTOR	SHIRLEY RANDOLPH		3003 N. OVERLOOK RD #1	BOISE	ID	USA	83704
DIRECTOR	KITUTA I ASIMBA		3378 N. LENA PLACE	BOISE	ID	USA	83713
PRESIDENT	JENNIFER YOST		1125 S CHALKBOARD PLACE	KUNA	ID	USA	83634
TREASURER	MIKE JAEGER		1750 W. FRONT STREET SUITE 150	BOISE	ID	USA	83702
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*					
ID		Signature: Rita Beedle		Date: 02/09/2016			
C 137915		Name (type or pr	Title: Executive Asst/HR Mgr				
Processed 02/09/2016		* Electronically provi	ded signatures are accepted as original sign	natures.			