No. C 45120				2. Register	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LAKE CITY SENIOR CENTER, INC. BONNIE STEARNS 1916 LAKEWOOD DRIVE COEUR D'ALENE ID 83814		101614	VICKIE HARRISON 1916 LAKEWOOD DRIVE COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
				COEUR				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter N	ames and Busin	ess Addresses of	President, Secretary, and Directors. Tre	easurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RICHARD PA	ANABAKER	9807 N SCHMIDT	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 45120		Signature: Vickie Harrison			Date: 01/16/2009			
		Name (type o		Title: Manager				
Processed 01/16/2009		* Electronically provided signatures are accepted as original signatures.						