No. <b>C 97736</b>		Due no later than Feb 28, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JEFFREY A WAGNER 511 LAKE CASCADE PRKWY CASCADE ID 83611				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CASCADE FAMILY WORSHIP CENTER CHURCH, INC.  CASCADE FAMILY JEFFREY WAGNER  PO BOX 178  CASCADE ID 83611-0178						
					New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	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	DENT JEFFREY A		1918 GOLD DUST RD		CASCADE	ID	USA	83611
SECRETARY DALE WILLIA		AMS	BOX 364		CASCADE	ID	USA	83611
TREASURER DALE LOOMI		IS	BOX 792		DONNALLY	ID	USA	83615
DIRECTOR TIM BYRNE			BOX 731		CASCADE	ID	USA	83611
DIRECTOR	DIRECTOR DOLLY WOLV		PO BOX 295		CASCADE	ID	USA	83611
5. Organized Under the	Laws of:	6. Annual Repo	rt must be signed.*					
		Signature: JEFFREY WAGNER			Date: 01/29/2017			
ID					And the second s			
C 97736		Name (type or print): JEFFREY WAGNER Title: PRESIDENT						
Processed 01/29/2017		* Electronically p	provided signatures are accepted as orig	ginal signa	itures.			