

No. C 59143		Due no later than Aug 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. COEUR D'ALENE CHRISTIAN CENTER INCORPORATED DAVID W HOIT 3639 W PRAIRIE AVE HAYDEN ID 83835		DAVID W HOIT 3639 W PRAIRIE AVE HAYDEN ID 83835			
				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	DEREK W SOVEREIGN	1410 W YAQUINA DR POST FALLS	POST FALLS	ID	USA	83854	
PRESIDENT	DAVID W HOIT	8381 N RASPBERRY LANE	HAYDEN	ID	USA	83835	
DIRECTOR	CAREY W SOVEREIGN	W 3425 BEAN AVENUE	HAYDEN	ID	USA	83835	
DIRECTOR	SHANE T GOODNER	707 S TWILIGHT CT	POST FALLS	ID	USA	83854	
SECRETARY	LLOYD O TAYLOR	2298 W FALLING STAR LOOP	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: ID C 59143		6. Annual Report must be signed.* Signature: Shane T Goodner Name (type or print): Shane T Goodner Date: 08/15/2016 Title: Director					
Processed 08/15/2016		* Electronically provided signatures are accepted as original signatures.					