

|                                                                                                                                                        |                  |                                                                                                                                                                           |          |                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------|---------|-------------|--|
| No. <b>C 21173</b>                                                                                                                                     |                  | Due no later than Dec 31, 2016                                                                                                                                            |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>  |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>CHRISTIAN AND MISSIONARY ALLIANCE CHURCH, INC. (THE)<br>PAUL W SMITH<br>1330 POWERS AVE<br>LEWISTON ID 83501 |          | PAUL SMITH<br>1330 POWERS AVE.<br>LEWISTON ID 83501 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                                           |          | 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 |  |
| PRESIDENT                                                                                                                                              | PAUL W. SMITH    | 1330 POWERS AVE.                                                                                                                                                          | LEWISTON | ID                                                  | USA     | 83501       |  |
| DIRECTOR                                                                                                                                               | KEVIN D. BEEHNER | 1330 POWERS AVE                                                                                                                                                           | LEWISTON | ID                                                  | USA     | 83501       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>C 21173</b>                                                                                               |                  | 6. Annual Report must be signed.*<br>Signature: Kevin Beehner<br>Name (type or print): Kevin Beehner<br>Date: 10/26/2016<br>Title: Director (Executive Pastor)            |          |                                                     |         |             |  |
| Processed 10/26/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                 |          |                                                     |         |             |  |