No. C 175595		Due	2. Registered Ager	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form JOHN P SO						
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. HOLY MYRRBEARING WOMEN ANTIOCHIAN ORTHODOX CHURCH INCORPORATED SHARON MATTHEWS PO BOX 1025 BONNERS FERRY ID 83805			222 NIGHTHAWK RD BONNERS FERRY ID 83805			
				3. New Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY TREASURER PRESIDENT	JENNIFER MATTMILLER SHARON MATTHEWS GARY IVINS		PO BOX 1433 348 TREETOP BLUFF LANE PO BOX 202	SANDPOINT BONNERS FERRY NAPLES	ID ID ID	USA USA USA	83864 83805 83847	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 175595		Signature: Sharon Matthews			Date: 10/22/2012			
		Name (type or p		Title: Treasurer				
Processed 10/22/2012		* Electronically provided signatures are accepted as original signatures.						