No. C 199599		Due no later than Sep 30, 2018		2. Registered Age	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. DAVENANT INSTITUTE, INC. W BRADFORD LITTLEJOHN 316 S WASHINGTON ST MOSCOW ID 83843		W BRADFORD LITTLEJOHN 316 S WASHINGTON ST MOSCOW ID 83843 3. New Registered Agent Signature:*				
A Corporations: Enter Names and Rusin		ess Addresses of President, Secretary, and Directors. Treasurer (optional).						
4. Corporations: Enter Nar Office Held	mes and Busin Name	ess Addresses of Pres	Street or PO Address	er (optional). City	State	Country	Postal Code	
DIRECTOR DIRECTOR DIRECTOR TREASURER PRESIDENT SECRETARY VICE PRESIDENT DIRECTOR DIRECTOR DIRECTOR DIRECTOR DIRECTOR DIRECTOR DIRECTOR	W.J. TORRAI MARK OLIVE STEVEN WE BROADUS R W BRADFOR TIMOTHY W JAKE MEADO	ERO DGEWORTH LITTLEJOHN III LD LITTLEJOHN AN DEN BROEK DR COTT PRYOR IILLER BLACK	138 ARCHWOOD AVENUE 105 ENOREE CIRCLE 9671 157B STREET 316 S. WASHINGTON STREET 1904 LEXINGTON AVENUE 620 E. 3RD ST. 2040 SOUTH STREET 5127 LADY OF THE LAKE DR. 320 1ST STREET 17 LARSTONE AVE. 60 TENNIS PLACE 10245 QUIET POND TERRACE	ANNAPOLIS GREER SURREY MOSCOW MOSCOW LINCOLN RALEIGH EAST NORTHPORT ETOBICOKE FOREST HILLS BURKE	MD SC BC ID ID ID NE NC NY ON NY VA	USA	21401-3438 29650 V4N 2T3 83843 83843 83843 68502 27612 11731 M8Z 2N5 11375 22015	
5. Organized Under the Laws of: ID C 199599		6. Annual Report must be signed.* Signature: Josiah Roberts Name (type or print): Josiah Roberts		Title: Ex	Date: 08/22/2018 Title: Executive Assistant			
Processed 08/22/2018		* Electronically provi	ded signatures are accepted as original s	signatures.				