No. C 126383		Annual Report Form 1. Mailing Address: Correct in this box if needed. TROY EVANGELICAL LUTHERAN CHURCH, INC. ELIZABETH A. LARSEN BOX 9		2. Registered Agent and Address (NO PO BOX) ELIZABETH LARSEN 220 S MAIN ST TROY ID 83871-0009 3. New Registered Agent Signature:*											
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE															
								4. Corporations: Enter Na	mes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY	MICHAEL DUNWORTH		507 CHRISTIE ST.	TROY	ID	USA	83871								
DIRECTOR	INA S MILLER		128 MARY ST.	TROY	ID	USA	83871								
DIRECTOR	PETER HAWORTH		610 SCOTT	TROY	ID	USA	83871								
DIRECTOR	DENNIS FALK		1690 RANDALL FLAT RD.	TROY	ID	USA	83871								
DIRECTOR	ELIZABETH LESLIE		1061 N. DRY CREEK LANE	TROY	ID	USA	83871								
DIRECTOR	GARY SCHLAKE		1020 DAVIDSON RD.	TROY	ID	USA	83871-9677								
DIRECTOR	CLANCY POTRATZ		425 SUNSET DR.	MOSCOW	ID	USA	83843-9677								
DIRECTOR	MARILYN HOSEID		PO BOX 432 1240 DRISCOLL RIDGE RI	D. TROY	ID	USA	83871-0432								
PRESIDENT	JIM LEE		PO BOX 208 105 WEST FOURTH	TROY	ID	USA	83871-0208								
DIRECTOR	JENA GRAM		2200 PLEASANT HILL RD.	DEARY	ID	USA	83823								
TREASURER	KIM SCHLAK	Œ	1020 DAVIDSON RD.	TROY	ID	USA	83871								
5. Organized Under the Laws of: 6. Ann		6. Annual Report mu	. Annual Report must be signed.*												
ID		Signature: Elizabeth A. Larsen			Date:	Date: 10/14/2009									
C 126383		Name (type or print): Elizabeth A. Larsen			Title:	Title: Pastor									
Processed 10/14/2009		* Electronically provide	led signatures are accepted as original sigr	atures.	_	_									