No. C 145368		Due i	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			TIFFANI SNELLING 1675 S. MAPLE GROVE RD. BOISE ID 83709 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. COMMUNITY CONNECTIONS INCORPORATED BRENDA NEIGHBORS 1675 S. MAPLE GROVE RD. BOISE ID 83709		101 - 112 - 122 - 1				
NO FILING FEE IF		DOISE 1D 03703		J. <u>INCW</u> Regio				
RECEIVED BY DUE DATE								
4. Corporations: Enter Names	and Busine	ess Addresses of Pre	sident, Secretary, and Directors. Treasu	rer (optional).				
Office Held Na	ame		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT TIFFANI G OV		WEN	1675 S. MAPLE GROVE RD.	BOISE	ID	USA	83709	
DIRECTOR TIFFANI G OV		WEN	1675 S. MAPLE GROVE RD.	BOISE	ID	USA	83709	
SECRETARY BRIAN FAY			1675 S. MAPLE GROVE RD.	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report m	ust be signed.*					
ID		Signature: Sarah Moore		Dat	Date: 09/07/2018			
C 145368		Name (type or print): Sarah Moore		Title	Title: Finance Manager			
Processed 09/07/2018	* Electronically provided signatures are accepted as original signatures.							