No. C 69526		Due no later than Apr 30, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LINDA M EMERSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		1113 MAIN STREET LEWISTON ID 83501			
		CONSUMER CREDIT COUNSELING SERVICE OF NORTHERN IDAHO, INC. LINDA M EMERSON PO BOX 1105					
				3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		LEWISTON ID 83501 USA					
4. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT JOAN M ZIMN		1MERMAN	2250 THAIN RD	LEWISTON	ID	USA	83501
SECRETARY ANNA LAWR		RENCE	NEZ PERCE TRIBAL HOUSING PO BOX 188	LAPWAI	ID	USA	83540
5. Organized Under th	ne Laws of:	6. Annual Report mu:	st be signed.*				
ID C 69526		Signature: Linda M Emerson		Date: 03/01/2010			
		Name (type or print): Linda M Emerson		Title: Executive Director			
Processed 03/01/2010		* Electronically provid	ed signatures are accepted as original sign	natures.			