No. C 5023	D	ue no later than Mar 31, 2009	2. Registered	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 RECEIVED BY DUE DATE	IMMANUEL EVIDAHO CAMI KOEPKI	Annual Report Form 1. Mailing Address: Correct in this box if needed. IMMANUEL EVANGELICAL LUTHERAN CHURCH OF BOISE,		PASTOR NEAL COLLINS 707 W FORT STREET BOISE ID 83702 3. New Registered Agent Signature:*			
4. Corporations: Enter Names and E	usiness Addresses of	President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	N HOBBS	9500 W. MEDALLION DR.	BOISE	ID	USA	83709	
	o. Dalton Ockter	736 HIGH POINT LN 1970 N. HEATH AVE	BOISE BOISE	ID ID	USA USA	83712 83713	
5. Organized Under the Laws of: 6. Annual R		rt must be signed.*					
ID Signature: Can		ami Koepke	Koepke Date: 02/11/2009				
C 5023	Name (type	Name (type or print): Cami Koepke		Title: Parish Administrator			
Processed 02/11/2009	* Electronically provided signatures are accepted as original signatures.						