No. <b>C 112025</b>		Due no later than Sep 30, 2014		2. Registered Agent and Address (NO PO BOX)									
Return to:		Annual Report Form		TINKA SCHAFFER  2740 E SPYGLASS COURT  COEUR D'ALENE ID 83815									
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CHILDREN'S VILLAGE FOUNDATION, INC.  JULIE LOCKHART  1350 W HANLEY AVE											
								COEUR D'ALENE ID 83815-8638		3. New Registered Agent Signature:*			
								NO FILING FEE IF		USA		-	
		RECEIVED BY DUE DATE											
4. Corporations: Enter Na	ames and Busin	ess Addresses of F	President, Secretary, and Directors. Treasurer	(optional).									
Office Held	Name		Street or PO Address	City	State	Country	Postal Code						
PRESIDENT	JAMES S. RILEY		10392 MORRIS ROAD	HAYDEN LAKE	ID	USA	83835						
TREASURER	RICHARD JURVELIN		103 E THERESA DRIVE	COEUR D'ALENE	ID	USA	83814-2261						
TREASURER	KATHY M BUSH		7919 N HELMS DEEP LANE	COEUR D'ALENE	ID	USA	83815-2261						
DIRECTOR PETE REED			6191 E KINGSWOOD LANE	COEUR D'ALENE	ID	USA	83814-2261						
SECRETARY	TINKA SCHAFFER		2740 E. SPYGLASS CT.	COEUR D'ALENE	ID	USA	83815-2261						
DIRECTOR	OR MARK GOODWIN		12181 N NINE BARK ROAD	HAUSER	ID	USA	83854						
DIRECTOR	CHRIS COX		15218 E PINNACLE LANE VERADALE	SPOKANE	WA	USA	99037						
	_												
5. Organized Under the Laws of:		6. Annual Report must be signed.*											
ID		Signature: Julie Lockhart		Date: 07/18/2014									
C 112025		Name (type or print): Julie Lockhart		Title: Executive Director									
Processed 07/18/2014 * Electronically provided signatures are accepted as original signatures.													