| No. <b>C 181716</b>  |               | Due no later than Jan 31, 2017 Annual Report Form   |  | 2. Registered Ag   | 2. Registered Agent and Address (NO PO BOX)                             |         |             |  |
|--|---------------|---|--|--|---|---------|-------------|--|
| Return to:   |               |   |  | ACCORDING TO SECURITION AND SECURITI | TONY ANTHONY LOPEZ  |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |               | 1. Mailing Address: Correct in this box if needed.  |  | 50 - 2000 CO - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1  | 450 3RD AVE W. TWIN FALLS ID 83301  3. New Registered Agent Signature:* |         |             |  |
|  |               | BECAUSE OF JESUS MINISTRIES CHURCH & CENTER INC. TONY ANTHONY LOPEZ 450 3RD AVE W TWIN FALLS ID 83301 |  |  |   |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |               |   |  |  | 3   | 3       |             |  |
| 4. Corporations: Enter Na  | mes and Busin | ess Addresses of Pi   | resident, Secretary, and Directors. Treasure | er (optional).   |   |         |             |  |
| Office Held  | Name          |   | Street or PO Address                         | City   | State   | Country | Postal Code |  |
| TREASURER  | THERESA LY    | /NN MCNALLY   | 450 3RD AVE W.                               | TWIN FALLS   | ID  | USA     | 83301       |  |
| TREASURER  |               |   | 515 WHISPERING PINE                          | TWIN FALLS   | ID  | USA     | 83301       |  |
| PRESIDENT TONY ANTHO   |               |   | 450 3RD AVE W                                | TWIN FALLS   | ID  | USA     | 83301       |  |
| VICE PRESIDENT TAEMURNI L  |               | _OPEZ   | 594 WASHINTON ST. SOUTH                      | TWIN FALLS   | ID  | USA     | 83301       |  |
| SECRETARY  | THERESA LY    | /NN MCNALLY   | 450 3RD AVE W                                | TWIN FALLS   | ID  | USA     | 83301       |  |
| 5. Organized Under the Laws of:  |               | 6. Annual Report i  |  |  |   |         |             |  |
| ID<br>C 181716   |               | Signature: The  |  | Date: 01/05/2017   |   |         |             |  |
|  |               | Name (type or   |  | Title: Secretary   |   |         |             |  |
| Processed 01/05/2017 * Electronically provided signatures are accepted as original signatures. |               |   |  |  |   |         |             |  |