

| No. <span style="float: right;">64097</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Idaho Corporation Annual Report Form</b><br>Due No Later Than November 1, 1992                                                                                                                                           |                                                                                                                                                                                                                                                                                           | 2. Registered Agent and Office NOT A P.O. BOX<br><b>DOUG LITTLETON</b><br><b>P.O. BOX 207</b><br><br><b>KENDRICK ID 83537 207</b> |              |                                                                                     |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
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| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1. Making Address <input type="checkbox"/> Correct <input type="checkbox"/> Not Correct<br><br><b>KENDRICK ASSEMBLY OF GOD, INCOR</b><br><b>DOUG LITTLETON</b><br><b>P. O. BOX 207</b><br><br><b>KENDRICK ID 83537 0207</b> |                                                                                                                                                                                                                                                                                           | 3. Incorporated Under The Laws<br>of<br><b>NO: 64097</b>                                                                          |              |                                                                                     |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| * FIRST NOTICE *<br>NO FEE REQUIRED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                           |                                                                                                                                   |              |                                                                                     |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| 4. Names and Addresses of Officers and Directors <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 15%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Robert Novak</td> <td>P.O. Box 207</td> <td>Kendrick</td> <td>ID</td> <td>83537</td> </tr> <tr> <td>Secretary:</td> <td>Connie Williams</td> <td>1010 Eichner Rd.</td> <td>Kendrick</td> <td>ID</td> <td>83537</td> </tr> <tr> <td>Directors:</td> <td>Norm Olson</td> <td>P.O. Box 533</td> <td>Juliaetta</td> <td>ID</td> <td>83535</td> </tr> <tr> <td></td> <td>Marie Grant</td> <td>Box 447</td> <td>Juliaetta</td> <td>ID</td> <td>83535</td> </tr> </tbody> </table> |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                           |                                                                                                                                   |              |                                                                                     | <u>Name</u>                                | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | Robert Novak | P.O. Box 207 | Kendrick | ID | 83537 | Secretary: | Connie Williams | 1010 Eichner Rd. | Kendrick | ID | 83537 | Directors: | Norm Olson | P.O. Box 533 | Juliaetta | ID | 83535 |  | Marie Grant | Box 447 | Juliaetta | ID | 83535 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>Name</u>                                                                                                                                                                                                                 | <u>Street or P.O. Address</u>                                                                                                                                                                                                                                                             | <u>City</u>                                                                                                                       | <u>State</u> | <u>Zip</u>                                                                          |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Robert Novak                                                                                                                                                                                                                | P.O. Box 207                                                                                                                                                                                                                                                                              | Kendrick                                                                                                                          | ID           | 83537                                                                               |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Connie Williams                                                                                                                                                                                                             | 1010 Eichner Rd.                                                                                                                                                                                                                                                                          | Kendrick                                                                                                                          | ID           | 83537                                                                               |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Norm Olson                                                                                                                                                                                                                  | P.O. Box 533                                                                                                                                                                                                                                                                              | Juliaetta                                                                                                                         | ID           | 83535                                                                               |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Marie Grant                                                                                                                                                                                                                 | Box 447                                                                                                                                                                                                                                                                                   | Juliaetta                                                                                                                         | ID           | 83535                                                                               |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| 5. Nature of Business<br><br><b>Church</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.                                                                                                                                                               |                                                                                                                                   |              |                                                                                     |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                             | <table style="width: 100%;"> <tr> <td style="width: 60%;">           Signature <u><i>Robert Novak</i></u><br/>           Name (Typed or Printed) <b>Robert Novak</b> </td> <td style="width: 40%;">           Date <u>11-3-92</u><br/>           Title <u>Pastor</u> </td> </tr> </table> |                                                                                                                                   |              | Signature <u><i>Robert Novak</i></u><br>Name (Typed or Printed) <b>Robert Novak</b> | Date <u>11-3-92</u><br>Title <u>Pastor</u> |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |
| Signature <u><i>Robert Novak</i></u><br>Name (Typed or Printed) <b>Robert Novak</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Date <u>11-3-92</u><br>Title <u>Pastor</u>                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                           |                                                                                                                                   |              |                                                                                     |                                            |                               |             |              |            |            |              |              |          |    |       |            |                 |                  |          |    |       |            |            |              |           |    |       |  |             |         |           |    |       |