No. C 204548 Return to:		Due no later than Jan 31, 2017 Annual Report Form		2. Registered A	Registered Agent and Address (NO PO BOX) C TIMOTHY HOPKINS			
				ADDRESS AND THE PROPERTY AND THE PROPERT				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.			428 PARK AVENUE IDAHO FALLS ID 83402			
		CAMPAIGN FOR AFRICAN ORPHANS, INC. C TIMOTHY HOPKINS 428 PARK AVENUE IDAHO FALLS ID 83402			3. New Registered Agent Signature:*			
				3. <u>INCW</u> Register				
4. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	QUEENIE M.	LINDERMAN	P. O. BOX 4571	VIRGINIA BEAC	CH VA	USA	23454	
SECRETARY	EDWARD GERARD DAILEY III		30 VALLEY ST.	WAKEFIELD	MA	USA	01880	
DIRECTOR BEN COMER			575 NE 5TH TER.	FORT LAUDERDALE	FL	USA	33301	
5. Organized Under the Laws of: 6. Annua		6. Annual Report mu	Annual Report must be signed.*					
ID C 204548		Signature:		Date: 12/	Date: 12/15/2016			
		Name (type or print):		Title:	Title:			
Processed 12/15/2016	5	* Electronically provide	led signatures are accepted as origin	nal signatures.				