No. <b>C 143211</b>		Annual Report Form  1. Mailing Address: Correct in this box if needed.  BETHEL MINISTRIES, INC.  ROBERT S.  PO BOX 44106		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	BETHEL M ROBERT PO BOX 4			ROBERT J LEE 5223 W ELMER ST BOISE ID 83703  3. New Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DAVID	SORENSON MCKELLIP T S. LEE	5407 BLAINE 12151 EDNA PO BOX 140554	NEW PLYMOUTH BOISE BOISE	ID ID ID	USA USA USA	83655 83713 83714	
PRESIDENT AL MU	RREY	910 HUGHES DR.	PAYETTE	ID	USA	83661	
5. Organized Under the Laws of: 6. Annual Repo		eport must be signed.*					
ID	Signature	Signature: Robert S. Lee		Date: 03/21/2011			
C 143211	Name (ty	Name (type or print): Robert S. Lee		Title: Treasurer			
Processed 03/21/2011 * Electronically provided signatures are accepted as original signatures.							