| No. <b>C 1512</b>  |                     | Due no later than Jul 31, 2017   |  | 2. Registered A                         | 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 |                     | Annual Report Form  1. Mailing Address: Correct in this box if needed.  OROFINO PECK UNITED METHODIST CHURCH, INCORPORATED BETTY L BURNHAM BOX 424 OROFINO ID 83544-0424 |  | RON NUGEN<br>22294 WILLIA<br>CULDESAC I |   |         |             |  |
| 4. Corporations: Enter Na  | mes and Busin       | ess Addresses of   | President, Secretary, and Directors. Treas | urer (optional).                        |   |         |             |  |
| Office Held  | Name                |  | Street or PO Address                       | City                                    | State                                       | Country | Postal Code |  |
| DIRECTOR   | JAKE PRUIT          |  | 3295 LAKEVIEW ROAD                         | OROFINO                                 | ID  | USA     | 83544       |  |
| DIRECTOR   | TED LEACH           |  | 10540 HWY. 12                              | OROFINO                                 | ID  | USA     | 83544       |  |
| DIRECTOR   | ECTOR TODD ROBIN    |  | 609 JOHNSON AVENUE                         | OROFINO                                 | ID  | USA     | 83544       |  |
| TREASURER  | REASURER BETTY L BU |  | 10522 HARTFORD AVE.                        | OROFINO                                 | ID  | USA     | 83544       |  |
| SECRETARY  | PAT ALLEN           |  | P. O. BOX 2551                             | OROFINO                                 | ID  | USA     | 83544-2551  |  |
| PRESIDENT  | RON NUGEN           |  | 22294 WILLIAMS ROAD                        | CULDESAC                                | ID  | USA     | 83524-2551  |  |
| 5. Organized Under the Laws of:  |                     | 6. Annual Repor  |  |   |   |         |             |  |
| ID   |                     | Signature: BETTY BURNHAM   |  |   | Date: 06/18/2017                            |         |             |  |
| C 1512   |                     | Name (type o   |  | Title: TREASURER                        |   |         |             |  |
| Processed 06/18/2017 * Electronically provided signatures are accepted as original signatures.                             |                     |  |  |   |   |         |             |  |