No. C 161400 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Jul 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. NUMERICA CREDIT UNION CINDY LEAVER PO BOX 4000 SPOKANE VALLEY WA 99037		2. Registered Ager	2. Registered Agent and Address (NO PO BOX) KAREN HANKS 8370 N CORNERSTONE DR HAYDEN ID 83835 3. New Registered Agent Signature:*			
				8370 N CORNEF HAYDEN ID 83				
4. Corporations: Ente	r Names and Busin	ess Addresses of Pro	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	SCOTT CLAI	RK	19608 E. KNOX	LIBERTY LAKE	WA	USA	99016	
DIRECTOR	LIESEL KITTLITZ		6305 S MADELIA ST	SPOKANE	WA	USA	99223	
DIRECTOR	ADAM BENSON		1915 E 63TH AVE	SPOKANE	WA	USA	99223	
DIRECTOR	YVONNE SMITH		10108 FLEETWOOD	SPOKANE	WA	USA	99208	
DIRECTOR	SUSAN NIELSEN		3409 E TARA DRIVE	SPOKANE	WA	USA	99223	
DIRECTOR	SCOTT PLUMB		15415 E 23 RD	SPOKANE VALLEY	′ WA	USA	99037	
PRESIDENT	CARLA L ALTEPETER		15118 E RIDGE LN	SPOKANE VALLEY	′ WA	USA	99037	
DIRECTOR	RON HUPP		82 SUN VALEY DR	WENATCHEE	WA	USA	98801	
DIRECTOR	ROBIN HARMON		16211 N MADISON RD	MEAD	WA	USA	99021	
DIRECTOR	WES MORTENSEN		507 S LUCILLE CT.	SPOKANE VALLEY	′ WA	USA	99216	
5. Organized Under the Laws of: 6. Ann		6. Annual Report n	5. Annual Report must be signed.*					
WA		Signature: Cindy Leaver		D	Date: 07/27/2017			
C 161400		Name (type or print): Cindy Leaver		Т	Title: CFO			
Processed 07/27/2013	7	* Electronically prov	vided signatures are accepted as origina	al signatures.				