

No. <b>C 13490</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1996</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>JOAN C. CHAVEZ</b> <b>1416 CHINOOK</b>  <b>MOSCOW ID 83843</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>OMEGA PHI ALPHA SORORITY (TH</b> <b>JOAN C. CHAVEZ</b> <b>1416 CHINOOK</b>		3. Organized Under the Laws of:
<b>* FIRST NOTICE *</b> <b>MOSCOW</b> <b>ID 83843</b> <b>ID</b> <b>C 13490</b>			
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
PRESIDENT	JOAN C. CHAVEZ	1416 CHINOOK	MOSCOW ID 83843
SEC/TREAS.	ELAINE C. BROYLES	977 EAST F ST.	MOSCOW ID 83843
DIRECTOR	LINDA HAMPTON	ROUTE 1	GENESEE ID 83832
5. <b>NATURE OF BUSINESS</b>  <b>FRATERNAL</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. Signature <u>Elaine C. Broyles</u> Date <u>Sept. 28, 1996</u> Name (Typed or Printed) <u>ELAINE C. BROYLES</u> Title <u>Secretary</u>	

ISSUED: 07-06-1996

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