

No. <b>C 84240</b>		<b>Due no later than Jun 30, 2017</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> PREGNANCY CARE CENTER, INC. (THE) SCOTT MAYNES 2020 12TH AVE LEWISTON ID 83501		JIM HIGGINS 2020 12TH AVE LEWISTON ID 83501		
				3. <u>New</u> 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	CHRISTINE T. KING	2860 24TH STREET	CLARKSTON	WA	USA	99403
DIRECTOR	SCOTT MAYNES	2813 11TH AVE	LEWISTON	ID	USA	83501
PRESIDENT	JIM HIGGINS	1744 VALLEY VIEW DR	CLARKSTON	WA	USA	99403
SECRETARY	CRAIG EMERSON	222 N. PROSPECT BLVD	LEWISTON	ID	USA	83501
TREASURER	CAROLINE HATFIELD	346 W. RESERVOIR DR	LEWISTON	ID	USA	83501
VICE PRESIDENT	JIM BROEMMELING	2485 17TH ST	CLARKSTON	WA	USA	99403
5. Organized Under the Laws of:  <b>ID C 84240</b>		6. Annual Report must be signed.* Signature: Scott Maynes Name (type or print): Scott Maynes Date: 06/19/2017 Title: Executive Director				
Processed 06/19/2017		* Electronically provided signatures are accepted as original signatures.				