

No. C 93533

Due no later than Oct 31, 2002  
Annual Report Form

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

1. Mailing Address - Correct in this box, if applicable

SURVIVORS OF SUICIDE, INC.  
ELAINE SULLIVAN  
2411 SOUTH WOODRUFF

IDAHO FALLS, ID 83404

2. Registered Agent and Office NO PO BOX

ELAINE SULLIVAN  
2411 SOUTH WOODRUFF

IDAHO FALLS, ID 83404

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

City

State

Zip

<i>President</i>	<i>Elaine Sullivan</i>	<i>2411 S Woodruff</i>	<i>Id Falls</i>	<i>ID</i>	<i>83404</i>
<i>VP</i>	<i>Hollie Gray</i>	<i>1340 Utley Cir</i>	<i>Id Falls</i>	<i>ID</i>	<i>83404</i>
<i>Secy</i>	<i>Susan Holt</i>	<i>475 N. Crimson Dr</i>	<i>Id Falls</i>	<i>ID</i>	<i>83406</i>

5. Organized Under the Laws of:

IDAHO

C 93533

6.

Signature

Name  
(Typed or  
Printed)

*Elaine Sullivan*

*Elaine Sullivan*

Date

*9/27/02*

Title

*President*