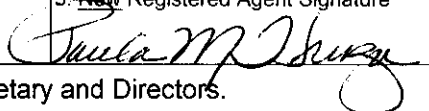
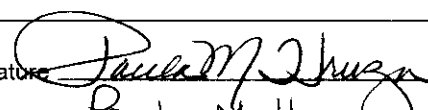


No. C 84603	Due no later than Aug 31, 2000 Annual Report Form		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		CHRIS HEPWORTH Paula Hruza 20504 4TH ST ACEQUIA RUPERT, ID 83350																			
	CARING PARENTS AND TEACHERS, INC. 20504 4TH ST ACQUIA ACEQUIA ELEMENTARY RUPERT, ID 83350																					
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			3. New Registered Agent Signature 																			
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Paula M. Hruza</td> <td>880 N 900 E</td> <td>Rupert</td> <td>ID</td> <td>83350</td> </tr> <tr> <td>Secretary</td> <td>Vickie Hansen</td> <td>235 E 700 N</td> <td>Rupert</td> <td>ID</td> <td>83350</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Paula M. Hruza	880 N 900 E	Rupert	ID	83350	Secretary	Vickie Hansen	235 E 700 N	Rupert	ID	83350
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5. Organized Under the Laws of: IDAHO C 84603		6.  Signature _____ Date <u>8-11-08</u> Name (Typed or Printed) <u>Paula M. Hruza</u> Title: <u>President</u> XXXX																				