

No. C 70495		Due no later than Jul 31, 2018		2. Registered Agent and Address (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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ACORN LEARNING CENTER, INC. CHRIS MANNEN 493 EASTLAND DRIVE TWIN FALLS ID 83301-4119		CHRISTINE F. MANNEN 3668 CEDAR DRAW LANE FILER ID 83328			
				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	
TREASURER	CHRISTINE F MANNEN	493 EASTLAND DRIVE	TWIN FALLS	ID	USA	83301-4119	
5. Organized Under the Laws of: ID C 70495		6. Annual Report must be signed.* Signature: Chris Mannen Name (type or print): Chris Mannen Date: 05/30/2018 Title: Head Teacher					
Processed 05/30/2018		* Electronically provided signatures are accepted as original signatures.					