No. <b>C 173967</b>		Due no later than Jul 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.		100 MUSTAN	KATHARINE WOODS 100 MUSTANG LN BELLEVUE ID 83313			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		MOUNTAIN SCHOOL, INC. (THE) KATHARINE WOODS 100 MUSTANG LN BELLEVUE ID 83313			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		BELLEVOL 15						
4. Corporations: Enter Nar	mes and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	KATHARINE WOODS		100 MUSTANG LN	BELLEVUE	ID	USA	83313	
SECRETARY	PRISCILLA WOODS		PO BOX 964	HAILEY	ID	USA	83333	
PRESIDENT	WARD W WOODS JR PETER SCHMID		PO BOX 964	HAILEY	ID	USA	83333	
TREASURER DIRECTOR	MARK GATES		PO BOX 4469 100 MUSTANG LN	HAILEY BELLEVUE	ID ID	USA USA	83333 83313	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*						
ID		Signature: Sandy Kelly			Date: 05/23/2015			
C 173967		Name (type or print): Sandy Kelly			Title: Accountant			
Processed 05/23/2015 * Electronically provided signatures are accepted as original signatures.								