| (No. C 9994) | | al Report Form er Than November 30, | 1996 2. Reg | istered Agent and | Office NOT | 4 P.O. BOX | |
|--|--|---|----------------|---------------------|-------------------------|------------|--|
| Return to: SECRETARY OF STATE | : | se Correct, If Not Correct | | EGORY J. 7 North | | STREET | |
| 700 WEST JEFFERSON PO BOX 83720 | CHILDREN'S | SCHOOL OF BOIS | SE, STE | 200 | OZATII (| 71 11 1 | |
| BOISE, ID 83720-0080 | 1015 N 8TH S | T | 30 | ISE | ID | 33732 | |
| NO FEE REQUIRED | | | 3. Orga | | ized Under the Laws of: | | |
| * FIRST NOTICE * | BOISE | ID 83702 | | I D | C 999 | 140 | |
| 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) | | | | | | | |
| Office held Name | | et or P.O. Address | | Sity | State | <u>Zip</u> | |
| projecting cons | lyn Klefen | 604 N. Wali | uct l | 3012 | d | P37/2 | |
| President No | ny C. Smith spine Minsker Moce Smith Hones | 1503 Wanns | Janinas A | W. BoiL | c ID. | 83712 | |
| View-Pres. Roy | Inne Minsko | ff 2200 E. | Correme | ~ Ln, Boil | EQ 10.1 | F3702 | |
| Gey/Treas. Wa | Mage Smith | 1503 Way | m fruing | s fue, Br | ي يكور | 12 | |
| prector don | Hell | | y Brook | | X | 12 | |
| | Dubert | 3913 Mon | i ina win | d. Bo | /20 3-9 | 06 | |
| 5. NATURE OF BUSINESS | 6. certify t | hat this Annual Report h | as been examin | ed by me and i | s to the best | of my | |
| | Signature | May C. | My Th | Date | -16-9 | 6 | |
| PRESCHOOL & PRI | MARY ED Name (Tyr | med or Mary C. | Smith | Title | eride | nt. | |
| ISSUED: 07-06-19 | 796 | | ···· | 176 | 3 2 | | |
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