

|  |                |   |        |  |         |             |  |
|--|----------------|---|--------|--|---------|-------------|--|
| No. <b>C 184222</b>  |                | <b>Due no later than Aug 31, 2015</b>   |        | <b>2. Registered Agent and Address (NO PO BOX)</b> |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>HERITAGE ACADEMY, INC.<br>CHRISTINE IVIE<br>500 SOUTH LINCOLN<br>JEROME ID 83338<br>USA |        | BLAIR CROUCH<br>362 E 500 N<br>JEROME ID 83338     |         |             |  |
|  |                |   |        | 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 |  |
| SECRETARY  | TERESA MOLITOR | 812 PUEBLO ST   | BOISE  | ID   | USA     | 83702       |  |
| PRESIDENT  | BLAIR CROUCH   | 362 E. 500 N.   | JEROME | ID   | USA     | 83338       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 184222</b>  |                | 6. Annual Report must be signed.*<br>Signature: Cheryl Kary<br>Name (type or print): Cheryl Kary<br>Date: 06/29/2015<br>Title: Business Manager   |        |  |         |             |  |
| Processed 06/29/2015   |                | * Electronically provided signatures are accepted as original signatures.   |        |  |         |             |  |