No. <b>C 113894</b>		Due no later than Feb 28, 2014 Annual Report Form		2. Registered Age	Registered Agent and Address (NO PO BOX)     MARGARET HANSON			
Return to:								
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SNAKE RIVER MONTESSORI SCHOOL, INC. (THE) MARGARET HANSON 2970 E 1ST ST AMMON ID 83406		2970 E 1ST ST AMMON ID 83406  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		AMMON ID 63406		griature.				
4. Corporations: Enter	Names and Busin	ess Addresses of F	President, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	VICKI KROGS	STRAND	416 E 700 N	FIRTH	ID	USA	83236	
DIRECTOR	AIRICA STA	LEY	4173 CHERRYWOOD CIRCLE	AMMON	ID	USA	83406	
PRESIDENT	STEVE JANZ		2137 MONTICELLO DRIVE	IDAHO FALLS	ID	USA	83404	
SECRETARY	SUSAN WILSON		4530 S 5TH W	IDAHO FALLS	ID	USA	83404	
TREASURER	SCOTT TAYLOR		2359 BELMONT ROAD	IDAHO FALLS	ID	USA	83404	
DIRECTOR	LEO EATON		330 TIE BREAKER DRIVE	AMMON	ID	USA	83406	
DIRECTOR			4680 EAST SERENITY LANE	IDAHO FALLS	ID	USA	83406	
DIRECTOR BRANDY JANZEN			2137 MONTICELLO DRIVE	IDAHO FALLS	ID	USA	83404	
DIRECTOR	WENDY LOW	/Ε	4280 STONEBROOK LANE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*						
ID		Signature: Margaret Hanson		Date: 12/1	Date: 12/17/2013			
C 113894		Name (type or	print): Margaret Hanson	Title: Administrative Director				
Processed 12/17/2013 * Electronically provided signatures are accepted as original signatures.								