No. C 192509		Due no later than Oct 31, 2012		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			APRIL SATTISON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MONTICELLO MONTESSORI PARENT-FACULTY ASSOCIATION, INC. KRISTY GERRITSEN PO BOX 3608		GROUND OF RESIDENCE AND ALTERNATION OF THE	4139 MIRINDA LN IDAHO FALLS ID 83406			
				IDANOTALLS				
					3. <u>New</u> Registered Agent Signature:*			
				3. New Registere				
NO FILING FEE IF		IDAHO FALLS ID 83403						
RECEIVED BY DUE DATE								
4. Corporations: Enter Na	ames and Busin	ess Addresses of	President, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KRISTY GERRITSEN		1163 DIAMOND DRIVE	AMMON	ID	USA	83406	
VICE PRESIDENT			2431 CROFT ST	IDAHO FALLS	ID	USA	83401	
SECRETARY			415 N LADINO DR	IDAHO FALLS	ID	USA	83401	
TREASURER	LORI SULLIVAN		1101 STEVENS DR	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: 6. Annu		6. Annual Repor	t must be signed.*					
ID C 192509		Signature: Lori Sullivan		1	Date: 11/13/2012			
		Name (type or print): Lori Sullivan		Title: Treasurer				
Processed 11/13/2012	* Electronically provided signatures are accepted as original signatures.							