No. C 94958		Due no later than Apr 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SOUTH FREMONT EDUCATION FOUNDATION, INC. VAL HAMMOND P. O. BOX 263 ST. ANTHONY ID 83445 USA		VAL HAMMOND 2050 E 600 N ST ANTHONY 83445 3. New Registered Agent Signature:*			
. Corporations: Enter N	Names and Busin	ess Addresses of Pr	resident, Secretary, and Directors. Treasu	ırer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	TINA GROVE	ER .	3072 E 800 N	ST. ANTHONY	ID	USA	83445
DIRECTOR	TERESA GAI	RDNER	643 N 2400 E	ST. ANTHONY	ID	USA	83445
DIRECTOR	PATSY PETE	ERSON	2517 E 300 N	ST. ANTHONY	ID	USA	83445
DIRECTOR	JULIANNE HILL		660 N 5 W	ST. ANTHONY	ID	USA	83445
DIRECTOR	JILL MILLER		452 N 2700 E	ST. ANTHONY	ID	USA	83445
DIRECTOR	BLAKE BAUE	:R	2474 E 500 N	ST. ANTHONY	ID	USA	83445
DIRECTOR	CHRIS BROWN		679 N 1900 E	ST ANTHONY	ID	USA	83445
DIRECTOR	JOHN HANS	ON	1872 E 350 N	ST ANTHONY	ID	USA	83445
SECRETARY	ETHEL KOBLENZAR		660 N 2300 E	ST ANTHONY	ID	USA	83445
TREASURER	PAUL A BIRCH		770 E TARGHEE	ST ANTHONY	ID	USA	83445
PRESIDENT	VAL HAMMO	OND	2050 E 600 N	ST. ANTHONY	ID	USA	83445
5. Organized Under the Laws of: 6. Ann		6. Annual Report r	i. Annual Report must be signed.*				
ID		Signature: PAUL BIRCH		Date: 02/17/2015			
C 94958		Name (type or print): PAUL BIRCH		Title: TREASURER			
rocessed 02/17/2015		* Electronically pro	vided signatures are accepted as original	signatures.			