

No. C101512	<b>Annual Report Form</b> Due No Later Than November 30, 1996	2. Registered Agent and Office <b>NOT A P.O. BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct <b>A. SPECIAL N.E.S.T., INC.</b> <b>VALORIE KOLSEN</b> <b>2389 JEROME</b>  <b>POCATELLO ID 83201</b>	<b>VALORIE KOLSEN</b> <b>2368 HORIZON</b>  <b>POCATELLO ID 83201</b>
		3. Organized Under the Laws of: <b>ID C101512</b>

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Valorie Kolsen	2389 Jerome	Poc.	ID	83201
Sec.	Carlene Carter	2121 W 850 S	Sterling	ID	83210
Director	Bill McNabb	8401 Buckskin	Poc.	ID	83201
Director	Kelly Hardman	68 S 2nd W	Aberdeen	ID	83210

5. NATURE OF BUSINESS  AID TO CHILDREN WITH SPECIAL NEEDS	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Valorie Kolsen</u> Date <u>10/26/96</u> Name (Typed or Printed) <u>Valorie Kolsen</u> Title <u>President</u>
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ISSUED: 10-05-1996

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