

No. C 184634		Due no later than Sep 30, 2013		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. SQUIRE FAMILY EDUCATION FOUNDATION, INC. JACKYE A SQUIRE 2431 14TH AVE LEWISTON ID 83501 USA		ORIN L SQUIRE 12225 GRAND AVE OROFINO ID 83544-9311			
				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	
DIRECTOR	TAMMY L GERBERDING	7414 VENICE DRIVE	CORPUS CHRISTI	TX	USA	78413	
DIRECTOR	JACKYE A SQUIRE	2431 14TH AVE	LEWISTON	ID	USA	83501	
DIRECTOR	LAURA L MEIER	1431 RIPON AVE, APT B	LEWISTON	ID	USA	83501	
TREASURER	JACKYE A SQUIRE	2431 14TH AVE	LEWISTON	ID	USA	83501-9311	
SECRETARY	TAMMY L GERBERDING	7414 VENICE DRIVE	CORPUS CHRISTI	TX	USA	78413-9311	
PRESIDENT	LAURA L MEIER	1431 RIPON AVE, APT B	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: ID C 184634		6. Annual Report must be signed.* Signature: Jackye Squire Name (type or print): Jackye Squire Date: 09/29/2013 Title: Treasurer					
Processed 09/29/2013		* Electronically provided signatures are accepted as original signatures.					