

No. C 111582		Due no later than Aug 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CLASSICAL CHRISTIAN ACADEMY, INC. DANIEL HOPPER 2289 W SELTICE WAY POST FALLS ID 83854		ERIC BALLEW 2432 S SUNRISE LN POST FALLS ID 83854-8385			
NO FILING FEE IF RECEIVED BY DUE DATE				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	JOHN UKICH	4554 HOOKER RD	HAYDEN	ID	USA	83835	
DIRECTOR	DUANE CRADDOCK	7415 N. 16TH STREET	DALTON	ID	USA	83815	
DIRECTOR	ERIC BALLEW	2432 S. SUNRISE LN.	GARDENS	ID	USA	83854	
SECRETARY	FRED BOSSE	5049 W. COUGAR GULCH RD.	POST FALLS	ID	USA	83814	
DIRECTOR	JOE ELLITHORPE	1707 S. PAINTED TRAIL RD.	COEUR D'ALENE	ID	USA	83814	
PRESIDENT	SCOTT CRAWFORD	701 S. STARLIGHT DR.	COEUR D'ALENE	ID	USA	83814	
TREASURER	AARON MICHALK	2801 N. HOWELL RD.	COEUR D'ALENE	ID	USA	83854	
DIRECTOR	FRED SACCONI	6115 N ST CROIX DR.	POST FALLS	ID	USA	83815	
VICE PRESIDENT	MARK MONTGOMERY	6992 W. CENTURY DRIVE	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: ID C 111582		6. Annual Report must be signed.* Signature: Laura Bosse Name (type or print): Laura Bosse					
		Date: 09/20/2016 Title: Accountant					
Processed 09/20/2016 * Electronically provided signatures are accepted as original signatures.							