

|                                                                                                                                                        |                |                                                                                                                                                                                             |                |                                                             |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------|---------|-------------|--|
| No. <b>C 77960</b>                                                                                                                                     |                | <b>Due no later than Mar 31, 2012</b>                                                                                                                                                       |                | 2. Registered Agent and Address <b>(NO PO BOX)</b>          |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>TRINITY CHRISTIAN SCHOOL, INC.<br>KATINA ALLEN<br>210 IDAHO ST<br>AMERICAN FALLS ID 83211 |                | KATINA ALLEN<br>210 IDAHO STREET<br>AMERICAN FALLS ID 83211 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                             |                | 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                                                                                                                                               | STEVE KAUFFMAN | SUNBEAM ROAD                                                                                                                                                                                | AMERICAN FALLS | ID                                                          | USA     | 83211       |  |
| DIRECTOR                                                                                                                                               | MERLE FRIESEN  | FAIRVIEW LANE                                                                                                                                                                               | AMERICAN FALLS | ID                                                          | USA     | 83211       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 77960</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Katina Allen<br>Name (type or print): Katina Allen<br>Date: 03/22/2012<br>Title: Secretary                                                  |                |                                                             |         |             |  |
| Processed 03/22/2012                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                                   |                |                                                             |         |             |  |