

| No. <b>C 155419</b>  |                 | <b>Due no later than Jul 31, 2016</b><br><b>Annual Report Form</b>   |          | 2. Registered Agent and Address ( <b>NO PO BOX</b> ) |         |  |  |
|--|-----------------|--|----------|--|---------|--|--|
| Return to:<br><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>1. Mailing Address: Correct in this box if needed.</b><br><br>FALCON RIDGE PUBLIC CHARTER SCHOOL, INC.<br>FALCON RIDGE<br>PO BOX 326<br>KUNA ID 83634 |          | JIM NEGOMIR<br>278 S TEN MILE<br>KUNA ID 83634       |         |  |  |
|  |                 |  |          |  |         | 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                                |  |
| TREASURER  | ERICA KALLIN    | 929 JUMP ROPE PLACE  | KUNA     | ID   | USA     | 83634                                      |  |
| PRESIDENT  | JIM NEGOMIR     | 8351 S OLD FARM PLACE  | MERIDIAN | ID   | USA     | 83642                                      |  |
| VICE PRESIDENT   | DEREK ROBINSON  | 279 N. TEN MILE  | KUNA     | ID   | USA     | 83634                                      |  |
| DIRECTOR   | ELIZABETH HAGEN | 1568 N. TWO POINT PLACE  | KUNA     | ID   | USA     | 83634                                      |  |
| SECRETARY  | LACI MCRAE      | 862 S. JUMP ROPE PLACE   | KUNA     | ID   | USA     | 83634                                      |  |
| DIRECTOR   | DIXIE HERRING   | 2634 S. SONOMA STREET  | NAMPA    | ID   | USA     | 83686                                      |  |
| DIRECTOR   | MATTHEW LENZ    | 2163 W. SAGWON DRIVE   | KUNA     | ID   | USA     | 83634                                      |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 155419</b>  |                 | 6. Annual Report must be signed.*<br><br>Signature: ALICE HEIDA<br>Name (type or print): ALICE HEIDA<br><br>Date: 06/05/2016<br>Title: BUSINESS MANAGER  |          |  |         |  |  |
| Processed 06/05/2016 * Electronically provided signatures are accepted as original signatures.   |                 |  |          |  |         |  |  |