

No. C 140076		Due no later than Jul 31, 2013 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. NORTHWEST EXPERIENTIAL LEARNING FOUNDATION, INC. MONTE M MACCONNELL PO BOX 166 ARCO ID 83213 USA		ALLAN R BOSCH 205 N 10TH ST 4TH FL BOISE ID 83702 USA			
						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	MONTE MACCONNELL	PO BOX 166	ARCO	ID	USA	83213	
DIRECTOR	PHIL GILL	21 ROLLING HILLS	KEARNEY	NE	USA	68845	
5. Organized Under the Laws of: ID C 140076		6. Annual Report must be signed.* Signature: Monte M MacConnell Name (type or print): Monte M MacConnell					
Processed 07/10/2013		Date: 07/10/2013 Title: President * Electronically provided signatures are accepted as original signatures.					