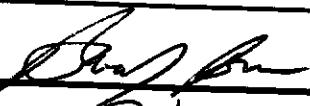


No. C 104027		Due no later than Nov 30, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BARBARA BROWN 1803 NORTH 9TH STREET BOISE ID 83702				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BOISE BEARS CHILD CARE CENTER, INC. FLOYD BROWN 5671 N COLLISTER DRIVE BOISE ID 83703		3. New Registered Agent Signature.				
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.								
Office Held	Name	Street or PO Address	City	State	Country	Postal Code		
Pres.	Barbara Brown	5671 Collister	Boise	ID		83703		
V. Pres.	Floyd Brown	5671 Collister	Boise	ID		83703		
Sec.	Keith Brown	4821 Collister	Boise	ID		83703		
Treas.	Tammy Leathers	1092 W Gold	Kuna	ID		83634		
5. Organized Under the Laws of: IDAHO C 104027		6. Signature:  Name (type or print): Barbara J. Brown						Date: 11-24-10 Title: owner
Issued 10/26/2010 by CLH								
100892								

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.