


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. <u>New</u> 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.	Kevin Brown	4821 Collister	Boise	ID	83703
Treas.	Tammy Leathers	1092 W Gold Kuna	ID		83634
5. Organized Under the Laws of:		6.			
IDAHO C 104027		Signature: 		Date: 11-24-10	
		Name (type or print): Barbara J Brown		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.