No. C 156222	Due no later than August 31, 2006	2. Registered Agent and Office NO PO BOX
NO. T.	Annual Report Form	SHARON HARDY MILLS
Return to:	1. Mailing Address - Correct in this box, if applicable	243 MOUNTAIN VIEW DR
SECRETARY OF STATE	ALBION CAMPUS FOUNDATION INCORPORAT	ALBION, ID 83311
700 WEST JEFFERSON PO BOX 83720	P O BOX 382	
BOISE, ID 83720-0080	BURLEY, ID 83318	
BOIOL, ID 007E0 0000		3. New Registered Agent Signature
NO FILING FEE IF		
PECEIVED BY DUE DATE		
Corporations: Enter Name	es and Business Addresses of President, Secre	tary and Directors.
Corporations. Enter regime		City State Zip
Office held Name	Street or P.O. Address	ustey JQ 833/8
Drawn & Shaper W		
president Shakon P	00-6. + 200 Sach E	Burley 10 03318
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Organized Under the Laws of:	Signature / 2017 Hours	Si Mill Date 29 Nave 2006
<u> </u>	Signature / Jakob Harris	
	TO A STORY	vdy-MillsTitle Pros