

Annual Report Form

Due No Later Than November 30,

1998

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

VALLEY CHRISTIAN DAY CARE L.

3072 HEATHERWOOD RD

TWIN FALLS

ID 83301

2. Registered Agent and Office NOT A P.O. BOX

DANIEL S FUCHS

3072 HEATHERWOOD RD

TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID

W

4152

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one)Office heldNameStreet or P.O. AddressCityStateZip

Daniel S. Fuchs

3072 Heatherwood Rd

Twin Falls Id

83301

Barbara J. Fuchs

5. Signature of New Registered Agent

6.

Signature

Daniel S. Fuchs

Date

9/15/98

Name

(Typed or
Printed)

Daniel S. Fuchs

Title

member

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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