

October 24, 1996

Kiddie Korner, Inc. C69703  
Box 557  
St. Maries Id 83861

RE: Kiddie Korner, Inc. C69703

Greetings:

Please find enclosed your recently submitted annual report for the 1996-1997 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain that the names and addresses of the officers in block 4 are complete. (A notation that the information is the same as last year will not be accepted.) After completing that block, resubmit the annual report to this office.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries  
Corporate Division

Enclosures: cited

No. C 69703	<b>Annual Report Form 1996</b> Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>						
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct		DAVE DALTON 319 S. 7TH STREET  ST. MARIES ID 83861						
	KIDDIE KORNER, INC.  BOX 557  ST. MARIES ID 83861								
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)			3. Organized Under the Laws of:  ID C 69703						
<table border="1"> <tr> <td data-bbox="34 697 541 861">           5. NATURE OF BUSINESS             CHILD CARE CENTER             ISSUED: 10-05-1996         </td> <td colspan="4" data-bbox="541 697 1476 861">           6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.            Signature <u>Reha Knapp</u> Date <u>10-20-96</u>            Name (Typed or Printed) <u>REHA Knapp</u> Title <u>PAYROLL</u> </td> </tr> </table>					5. NATURE OF BUSINESS  CHILD CARE CENTER  ISSUED: 10-05-1996	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Reha Knapp</u> Date <u>10-20-96</u> Name (Typed or Printed) <u>REHA Knapp</u> Title <u>PAYROLL</u>			
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