No. C 65005	Due no later than Oct 31, 2000		2. Registered Agent and Office NO PO BOX	
Return to:	Annual Report Form	THO	OMAS SMITH	
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if		1 2ND AVENUE	
700 WEST JEFFERSON	PIONEER MONTESSORI SCHOOL, A N THOMAS SMITH	1		
D 0 D0V 4000		KE	KETCHUM, ID 83340	
BOISE, ID 83720-0080	1 0 BOX 1808			
NO FILING FEE IF	KETCHUM, ID 83340		3. New Registered Agent Signature	
RECEIVED BY DUE DATE				
	non and Rusiness Addresses of Brasid	lant Contatant and	d Directors	
Corporations, Enter Name	nes and Business Addresses of Presid	ent, Secretary and	d Directors.	
Office held Name	Street or P.O. Address	<u>City</u>	State Zip	
President Colleen Ko	assner B4 3507	Ketchum	1 ID 83340	
V-President Kathreen	Williams Box 432Z	Ketchun	n ID 83340	
Treasurer Common K		Ketchum	n ID 83340	
•	Smith Box 4045	Ketchum	TD 83340	
	einemann Box 1840	Sunvalled		
	Eudigoz Boxzz8	Sunvalleu		
	Palmer Box 750	Ketchum	TD 83340 TD 83340	
Kelly F	-eldman Box 2396	Ketchum	ID 83340	
5. Organized Under the Laws-of:	6.	(1)	01.1	
IDAHO	Signature		Date	
C 65005	Name (Typed or Thomas	Smith	Title: Director	

Issued 08/01/2000

Do Not Tape or Staple

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