

| No. C 101519                                                                                                                                                                                                                                                                                                                                       | Due no later than March 31, 2008<br>Annual Report Form                                                                                                                 |                                                                                                                                        | 2. Registered Agent and Office NO PO BOX                                                                                 |       |                                          |      |                        |      |       |     |                    |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------|------|------------------------|------|-------|-----|--------------------|--|--|--|--|--|
| Return to:<br>SECRETARY OF STATE<br>450 NORTH FOURTH STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080                                                                                                                                                                                                                                                | 1. Mailing Address - Correct in this box, if applicable<br><br>LEARNING LAB, INC.<br><del>GEMMA I. VANHOLE</del> Ann Heilman<br>308 E 36TH ST<br>GARDEN CITY, ID 83714 |                                                                                                                                        | GEMMA I. VANHOLE<br>715 S CAPITOL BLVD STE 40<br>BOISE, ID 83702<br>Ann Heilman<br>308 E 36th St<br>Garden City ID 83714 |       |                                          |      |                        |      |       |     |                    |  |  |  |  |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                                                                                                                                                                                                                                                                                                           | 3. New Registered Agent Signature<br>                                               |                                                                                                                                        |                                                                                                                          |       |                                          |      |                        |      |       |     |                    |  |  |  |  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.<br><table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td colspan="6" data-bbox="214 430 751 493">See attached list.</td></tr></tbody></table> |                                                                                                                                                                        |                                                                                                                                        |                                                                                                                          |       | Office held                              | Name | Street or P.O. Address | City | State | Zip | See attached list. |  |  |  |  |  |
| Office held                                                                                                                                                                                                                                                                                                                                        | Name                                                                                                                                                                   | Street or P.O. Address                                                                                                                 | City                                                                                                                     | State | Zip                                      |      |                        |      |       |     |                    |  |  |  |  |  |
| See attached list.                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                        |                                                                                                                                        |                                                                                                                          |       |                                          |      |                        |      |       |     |                    |  |  |  |  |  |
| 5. Organized Under the Laws of:<br>IDAHO<br>C 101519                                                                                                                                                                                                                                                                                               |                                                                                                                                                                        | 6. Signature <br>Name (Typed or Printed) Ann Heilman |                                                                                                                          |       | Date 2-28-08<br>Title Executive Director |      |                        |      |       |     |                    |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                        |                                                                                                                                        |                                                                                                                          |       | 200803001565                             |      |                        |      |       |     |                    |  |  |  |  |  |

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# Learning Lab

*Creating Opportunities Through Education*

308 E 36<sup>th</sup> Street Garden City ID 83714-6525 (208)344-1335 FAX (208)344-1171 [www.learninglabinc.org](http://www.learninglabinc.org)

## **Board of Directors** **June 2007 through May 2008**

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Boise, ID 83706

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Mike Rich  
Intermountain Gas Company  
PO Box 7608  
Boise, ID 83707

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PO Box 695  
Eagle, ID 83616

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Ron Harrell  
870 W Colchester Dr  
Eagle ID 83616-5890

#### **Past President**

Laura Peterson  
J. R. Simplot Company  
P.O. Box 27  
Boise, ID 83707

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Ann Heilman  
Learning Lab, Inc.  
308 E 36<sup>th</sup> St.  
Garden City ID 83714

### **Board Members**

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Boise, ID 83702

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Boise, Idaho 83706

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Meridian, ID 83642

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William "Rick" Polenske  
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Rich Toney  
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Boise ID 83704