No. C 116757		Due no later than Oct 31, 2012		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			KONNIE BAINES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ALMA MATER, INC. KONNIE BAINES 2670 NW 4TH AVE.		FRUITLAND I	2670 NW 4TH AVE. FRUITLAND ID 83619			
NO FILING FEE IF RECEIVED BY DUE DATE		FRUITLAND ID 83619			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	KONNIE BAINES		2670 N.W. 4TH AVENUE	FRUITLAND	ID	USA	83619	
DIRECTOR	DON WILSON		LOCUST AVENUE	FRUITLAND	ID	USA	83619	
PRESIDENT	BOB BAROWSKY		S.WEST THIRD STREET	FRUITLAND	ID	USA	83619	
DIRECTOR	OR DAVE KOEPPEN		424 S.W. THIRD ST	FRUITLAND	ID	USA	83619	
DIRECTOR	KELLY WHITING		5017 SARAH CT.	FRUITLAND	ID	USA	83619	
TREASURER	BRUCE PETERSON		P.O. BOX 706	FRUITLAND	ID	USA	83619	
VICE PRESIDENT	RUSSELL STRAWN		1900 SW 1ST AVE	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Konnie Baines		Date: 10/	Date: 10/19/2012			
C 116757		Name (type or print): Konnie Baines		Title: Ex.	Title: Ex. Dir. & Secretary			
Processed 10/19/2012 * Electronically provided signatures are accepted as original signatures.								