

No. C 111582		Due no later than Aug 31, 2014		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. CLASSICAL CHRISTIAN ACADEMY, INC. DANIEL HOPPER 2289 W SELTICE WAY POST FALLS ID 83854 USA		ERIC BALLEW 2432 S SUNRISE LN POST FALLS ID 83854		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	FRED SACCONI	6115 N ST CROIX DR.	COEUR D'ALENE	ID	USA	83815
DIRECTOR	DUANE CRADDOCK	7415 N. 16TH STREET	DALTON GARDENS	ID	USA	83815
SECRETARY	ERIC BALLEW	2432 S. SUNRISE LN.	POST FALLS	ID	USA	83854
PRESIDENT	FRED BOSSE	5049 W. COUGAR GULCH RD.	COEUR D'ALENE	ID	USA	83814
DIRECTOR	JOE ELLITHORPE	1707 S. PAINTED TRAIL RD.	COEUR D'ALENE	ID	USA	83814
DIRECTOR	SCOTT CRAWFORD	701 S. STARLIGHT DR.	COEUR D'ALENE	ID	USA	83814
TREASURER	AARON MICHALK	8637 N. MAPLE STREET	HAYDEN	ID	USA	83835
DIRECTOR	DALE HAALAND	11648 N. BRUSS RD.	RATHDRUM	ID	USA	83858
5. Organized Under the Laws of: ID C 111582		6. Annual Report must be signed.* Signature: Laura Bosse Name (type or print): Laura Bosse Date: 08/06/2014 Title: Accountant				
Processed 08/06/2014		* Electronically provided signatures are accepted as original signatures.				