

No. C 198193		Due no later than Apr 30, 2018		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. NEW SAINT ANDREWS COLLEGE, INC. THOMAS H BRAINERD, SR 405 S MAIN ST MOSCOW ID 83843		THOMAS H BRAINERD SR 405 S MAIN ST MOSCOW ID 83843		
				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	ARNOLD ABENS	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	MICHAEL CHURCH	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	WILLIAM CHURCH	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	LUKE JANKOVIC	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	CSABA LEIDENFROST	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	JESS R MONNETTE	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	FRANCIS FOUCACHON	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	DAVID ALDERS	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	DAVID HATCHER	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	DOUGLAS J WILSON	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	CARLOS PLIEGO	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	WILBUR CARSON SENSING III	405 S MAIN ST	MOSCOW	ID	USA	83843
PRESIDENT	BENJAMIN J MERKLE	405 S MAIN ST	MOSCOW	ID	USA	83843
DIRECTOR	TOBY J SUMPTER	405 S MAIN ST	MOSCOW	ID	USA	83843
5. Organized Under the Laws of: ID C 198193		6. Annual Report must be signed.* Signature: Thomas Brainerd Name (type or print): Thomas Brainerd Date: 02/28/2018 Title: CFO				
Processed 02/28/2018		* Electronically provided signatures are accepted as original signatures.				