No. **C 180088**	**Due no later than Sep 30, 2009** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** HOP SCOTCH LEARNING CENTER, INC. MILLY NELSON 2124 12TH AVE LEWISTON ID 83501	MILLY NELSON 2124 12TH AVE LEWISTON ID 83501 3. New 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
PRESIDENT	MILLY J NELSON	2124 12TH AVE.	LEWISTON	ID	USA	83501

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 180088**	Signature: Milly Nelson	Date: 09/14/2009
	Name (type or print): Milly Nelson	Title: Owner

Processed 09/14/2009

* Electronically provided signatures are accepted as original signatures.