

No. <b>C 193139</b>		<b>Due no later than Dec 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  APPRENTICESHIP PROGRAMS, INC. AARON HOWELL 7600 S MERIDIAN RD MERIDIAN ID 83642		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
						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	AARON Q HOWELL	7600 S MERIDIAN ROAD	MERIDIAN	ID	USA	83642	
PRESIDENT	AARON Q HOWELL	7600 S MERIDIAN ROAD	MERIDIAN	ID	USA	83642	
SECRETARY	LEANNA WHITNEY	7600 S MERIDIAN ROAD	MERIDIAN	ID	USA	83642	
TREASURER	KARLA K ROSA	7600 S MERIDIAN ROAD	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:  <b>ID</b> <b>C 193139</b>		6. Annual Report must be signed.*  Signature: Karla K. Rosa Name (type or print): Karla K. Rosa					
		Date: 12/30/2015 Title: CFO					
Processed 12/30/2015		* Electronically provided signatures are accepted as original signatures.					