

No. C 138957	Due no later than May 31, 2015 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. BEARLY GROWN CHILD CARE CENTER, INC. KATHRYN FISH 3605 N. LOCUST GROVE ROAD MERIDIAN ID 83646		KATHRYN FISH 2334 E CHIMERE DR MERIDIAN ID 83646			
			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
PRESIDENT	KATIE L FISH	2334 E. CHIMERE DRIVE	MERIDIAN	ID	USA	83646
TREASURER	JUSTIN L FISH	2334 E. CHIMERE DRIVE	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of: ID C 138957	6. Annual Report must be signed.* Signature: Katie Fish Name (type or print): Katie Fish		Date: 05/31/2015 Title: President			
Processed 05/31/2015		* Electronically provided signatures are accepted as original signatures.				