

No. W 30822		Due no later than May 31, 2012		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. IDAHO WOLVES SOCCER ACADEMY, LLC CHARLES W. BOWMAN 1461 THREE FOUNTAINS DRIVE IDAHO FALLS ID 83404-5626		C WYN BOWMAN 1461 THREE FOUNTAINS DRIVE IDAHO FALLS ID 83404-5626			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	C WYN BOWMAN	1461 THREE FOUNTAINS DR	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 30822		Signature: C. Wyn Bowman				Date: 06/29/2012	
		Name (type or print): C. Wyn Bowman				Title: Manager	
Processed 06/29/2012		* Electronically provided signatures are accepted as original signatures.					