

No. C 178494		Due no later than May 31, 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. LITTLE WIGGLE WORMS DAYCARE INCORPORATED GUERLINE H COX 16095 N DIAMOND PEAK DR NAMPA ID 83651		GUERLINE HYPPOLITE COX 16095 N DIAMOND PEAK DR NAMPA ID 83651			
				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	GUERLINE H COX	16095 N DIAMOND PEAK DRIVE	NAMPA	ID	USA	83651	
5. Organized Under the Laws of: ID C 178494		6. Annual Report must be signed.* Signature: Guerline Cox Name (type or print): Guerline Cox Date: 03/31/2009 Title: Owner					
Processed 03/31/2009		* Electronically provided signatures are accepted as original signatures.					