No. <b>W 125855</b>		Due no later than May 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CATHLEEN A POMEROY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CATHY'S AFTER SCHOOL CARE CENTER, LLC CATHLEEN A POMEROY 221-B S DIVISION AVE SANDPOINT ID 83864		SANDPOINT	1338 SUPERIOR ST SANDPOINT ID 83864  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200	nies: Enter Nai	mes and Addresses	of at least one Member or Manager.				90 Sec	
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CATHLEEN A	ANN POMEROY	1338 SUPERIOR ST	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Cath		Date: 03/22/2014				
W 125855		Name (type or p		Title: Owner				
Processed 03/22/2014 * Electronically provided signatures are accepted as original signatures.								